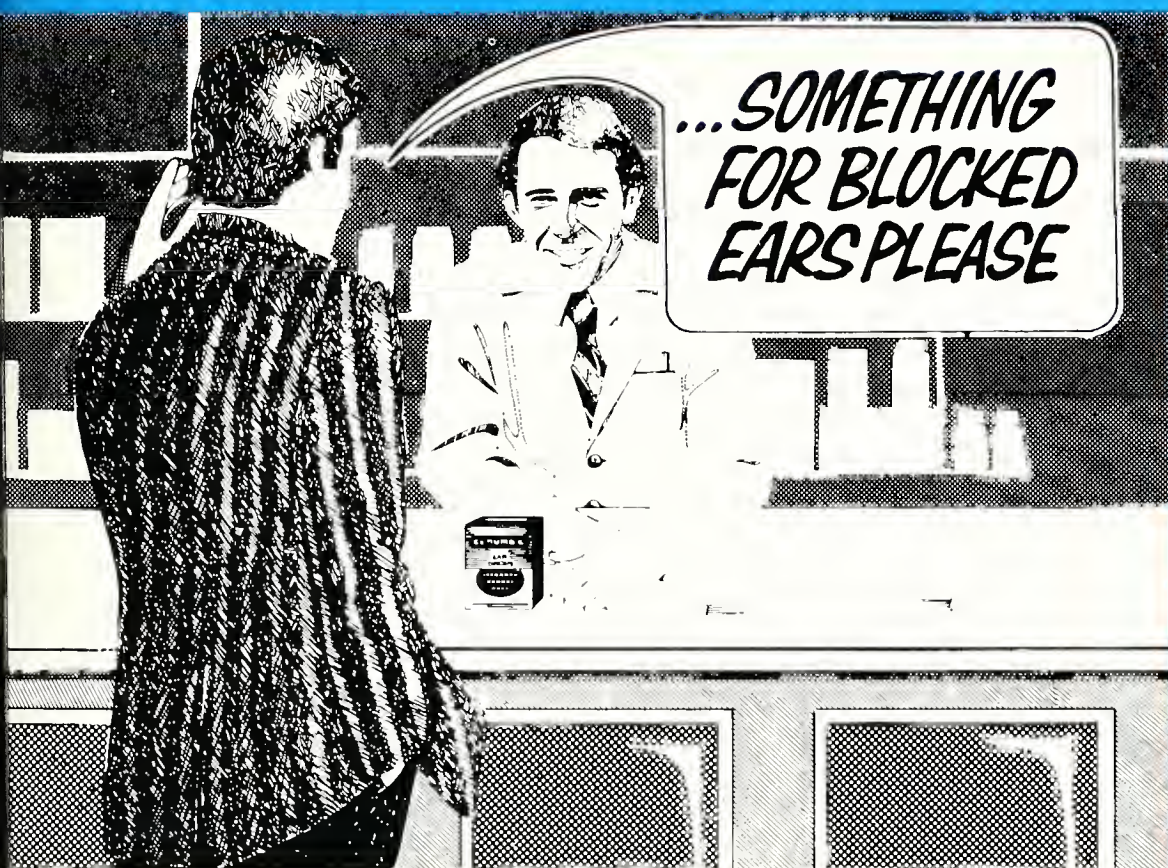


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**Mr Ennals
rejects profit
claim and
arbitration**

**Unichem
campaign for
Statutory
Committee**

**PSNC election:
Lewis Priest
loses place**

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CHEMIST & DRUGGIST

Incorporating Retail Chemist

11 March 1978

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11 March 1978

COMMENT

Missing voters . . .

"These elections will be carefully observed by the Department of Health, not only in respect of the candidates who are elected and their policy statements, but also in respect of the total number of contractors who show their concern by voting."

"Voting is harmful—apathy is harmful—a committee elected on an 80 per cent poll carries more weight in negotiations than one elected on a 20 per cent poll."

Those quotations, from the policy statements of two members of the Pharmaceutical Services Negotiating Committee who have won re-election (see p338), make a point that should hardly have needed spelling out to contractors. Yet the pleas seem to have fallen on many deaf ears. In other circumstances, a 40 per cent poll might have been reasonable in view of the fact that this was the first time ever that individual contractors have had the opportunity to vote for representatives of their choice—but surely a higher percentage should have made the effort after a year of frustration and anger over remuneration negotiations. They will not have another chance for four years.

What will Mr Ennals see if he examines the election results? All the PSNC members who stood for re-election regained their seats, the exception being Mr Lewis Priest who faced PSNC chairman Mr Bob Worby in the same region. That should infer the electorate's endorsement of the existing policy direction of PSNC—except that it will not be lost on the Department that all but one of the successful candidates (Mr David Coleman) were returned on a minority vote. Combined with a poll varying between 34 and 46 per cent in different regions, the voting must give little encouragement to the Committee.

But that is democracy in action, and Mr Ennals will be too familiar with "minority" situations to expect PSNC to do other than claim a full mandate for pressing its present policies with renewed vigour. Certainly there is no mandate for gratefully picking up the crumbs from Mr Ennals' table—contractors want their full and rightful share of the cake.

. . . militant activists

The voting activity might well have been different had Mr Ennals' rejected PSNC's demand for arbitration on the profit margin claim *before* the election (p338). Most of the successful candidates were putting their faith in reference of the claim to an independent party in the certainty that justice would prevail—and presumably Mr Ennals' foresaw that outcome too!

In opposing arbitration, he leaves contractors with a choice between acceptance of his unacceptable "offers"—and militancy. Withdrawal from the service and other sanctions represent a path the pharmaceutical profession has no desire to tread. But when all other options are removed, what then?

Mr Ennals rejects arbitration

Mr David Ennals, Secretary for Social Services, has rejected the Pharmaceutical Services Negotiating Committee's claim for an increase in profit margin and its request that the matter be referred to arbitration. PSNC has replied that the rejection represents unfair discrimination against chemist contractors and has asked Mr Ennals to reconsider.

A statement from PSNC says: "It is impossible to exaggerate the indignation of the members of PSNC at the reply received from the Secretary of State". Mr Ennals' letter reads:

"I have carefully considered your letter of December 22 about the net profit margin which covers three main issues; the rate of profit under the Review Board formula, the relevance of the Price Code and arbitration.

"I do not think that the rate of return under the profit formula applied to Government manufacturing contractors on the recommendations of the Review Board is relevant to NHS dispensing". (His reasons were in an Annex).

"Turning now to the Price Code, I notice that for cogent reasons your Committee asked in 1974 that chemists' NHS remuneration should be withdrawn from its provisions and there can no longer be any question of devising ways of applying its 'spirit' to the unique circumstances of NHS dispensing. The Price Code provisions dealing with net profit margin are in any case couched in permissive not mandatory terms, that is, even if they could be applied to NHS remuneration, they would state a maximum not to be exceeded—not an automatic entitlement to a particular rate of return—and any increase would be made only if the circumstances justified it.

'No such agreement'

"As for arbitration the arrangements to which you refer arise from an employer/employee relationship with clearly defined processes for settling disputes. There is no such agreement between the Government and the independent chemist contractors. That is not to say that arbitration is necessarily ruled out in all circumstances; but I am firmly of the view that, having recently come to an agreement, we must see how the agreed arrangements work out in practice before there could be any question of arbitration. We have, after all, already agreed to review the position at the end of the year and it would not in my view be reasonable to reopen matters in the meantime."

PSNC replied as follows: "The Committee was shocked to note that you are prepared neither to concede any increase in the net profit margin on NHS dis-

persing in response to the Committee's claim nor to agree that the dispute be now referred to arbitration.

"You say that 'having recently come to an agreement, we must see how the agreed arrangements work out in practice before there could be any question of arbitration'. The agreement to which you refer related solely to the introduction of a differential oncost system of payment which was approved in principle by our 1976 contractors conference and is totally irrelevant to and separate from the Committee's claim for an increase in the overall profit margin. This margin has remained unchanged since 1972 at 16 per cent on capital employed, and now represents only 2.9 per cent on turnover.

No review body

"You further base your present rejection of arbitration on the absence of any agreement for such an arrangement between the Government and independent chemist contractors and yet it has been possible for a similar profit margin issue to be settled by arbitration in Scotland. In considering the availability of arbitration you make a distinction between those groups having an employer/employee relationship and chemist contractors who have a contractual relationship with the Department. The Committee believes that the Government has recognised over the years that in the pursuit of good industrial relations it is necessary for negotiating groups to be able to avail themselves of an independent third party with a decision-making capacity. Other groups having a contractual relationship within the National Health Service, for example, doctors and dentists, are able to use the Review Body procedure to similar effect, but chemist contractors in England and Wales have no such body to resolve their dispute with your Department which, in this case, represents a monopoly employer.

"The Committee feels most strongly that your refusal to accede to arbitration at this time represents unfair discrimination against chemist contractors through the denial of a process generally available to other negotiating groups. The claim for an increased profit margin was lodged with your Department in March 1976 and the Committee sees no justification for any further delay in reaching a settlement through the means proposed.

"The Committee will be glad therefore if you will reconsider your present refusal to agree to arbitration and would particularly request that your reply be made available for consideration at its next meeting".

Bob Worby wins in PSNC election

In the Pharmaceutical Services Negotiating Committee elections Mr R. G. Worby, PSNC chairman with a National Pharmaceutical Association nomination, won in region 2, ousting the sitting member Mr Lewis Priest. In region 6, Mrs M. Rawlings narrowly led the poll replacing Mr G. T. M. David who decided not to contest the election. In other regions the sitting members were returned. The results were:—

Region 1: R. R. C. Kitchen 158; A. O. Bond 100; M. J. Bassil 76; S. R. Thomas 47; G. J. Hendra 30.

Region 2: R. G. Worby 188; S. Blum 104; L. Priest 99; R. M. Wise 50.

Region 3: D. L. Coleman 261; C. P. Howells 60; E. D. Hurt 58; J. Kirby 55; C. J. Nicholson 54.

Region 4: H. Steinman 190; J. Williams 116; J. P. Duigenan 74; R. Clitherow 64; D. W. Oultram 18.

Region 5: G. Urwin 154; R. M. Onley 119; L. Calvert 97; N. Baumber 76; B. Ellison 63; T. W. Whaley 41.

Region 6: (checked by recount) Mrs M. Rawlings 88; I. Phillips 86; R. Booker 63.

Bargain offers should be banned say OFT

Mr Gordon Borrie, director general of fair trading, has recommended that bargain offer claims like "5p off recommended price" should be banned. Speaking on Monday, he said: "I am sure that bargain offers of this kind, which are widespread, are confusing consumers, and in some cases are causing them to pay too much for the goods they need."

The recommendation covers all bargain offer claims where retailers indicate that their selling price is less than a recommended, suggested or maximum retail price, including many manufacturers' "flash offers" printed on packs and wrappers. The OFT report says that many claims are meaningless because the manufacturers' recommended prices are either set to suit high-cost retailers, or become out of date following structural or competitive developments in retailing, or because the recommended prices are set high deliberately—sometimes after pressure from retailers—so that retailers can claim their prices represent a big reduction and therefore good value. Mr Borrie commented: "I am worried that consumers are being persuaded by these claims mainly because the terms 'recommended price' and 'manufacturer's price' have an air of authority.

He also suggested that consumers may be confused by manufacturers' "flash offers" printed on packs because the recommended price is not usually quoted, the "reduced" price may in fact be higher than the shop's recent selling price. It is not proposed to stop manufacturers setting RRP's.

Complaint on Unichem to Statutory Committee

A complaint concerning a poster and competition campaign carried out by Unichem in 1977 is to be made to the Pharmaceutical Society's Statutory Committee. This decision was reached by Council at its meeting last week when they considered the judgment of the committee on the Boots diary case. Consequently Council agreed that the meeting with commercially interested parties on restricted titles in advertising, which had been postponed pending the Boots decision, should be cancelled. Council recommended the endorsement of the existing views on restricted titles in advertising, with Mr C. C. B. Stevens asking for his dissent to be recorded on that recommendation.

It was also agreed by Council that Boots should be informed that no action would be taken regarding the coat of arms displayed outside their premises in Swaffham.

PSNC seeks rise in preregistration employment grant

The Pharmaceutical Services Negotiating Committee is seeking to increase the grant payable to pharmacist contractors employing preregistration graduates. At last week's meeting the committee agreed that for the year 1978-79 the grant should be increased by 10 per cent to £1,100 and the Department of Health is to be informed accordingly.

A letter was received from the Advisory Conciliation and Arbitration Service relating to the Committee's claim, under Schedule 11 of the Employment Protection Act 1975, for an increase in the notional salary of the proprietor pharmacist. The reply indicated that ACAS could see no grounds for deferring reference of the issue to the Central Arbitration Committee.

Agreement has been reached with the Department of Health for an extra payment to be made to pharmacist contractors where they had, due to the shortage of medicine bottles, supplied a medicine bottle with a price in excess of the price of the British Standard medical. The Committee agreed that the matter should be re-considered towards the end of the two-month period for which the concession will apply.

A reply from the Department of Health had been received to the Committee's claim that the property costs of pharmacies during the rota period should be wholly attributable to the NHS. It



Mr D. Killer, MPS, of Williams Chemists Ltd, Bodmin, Cornwall being presented with the keys of his new car—first prize in an International Chemical Co Ltd trade competition—from Stephen Boyes, director of sales

was agreed that further representations be made to the Department.

The Committee considered the arrangements for emergency supplies on Form FP10 to be adopted following the implementation of Part III of the Medicines Act 1968. It was agreed that representations be made to the Department of Health that special Forms FP10 be issued to pharmacist contractors for use when supplying prescription only medicines in accordance with the provisions of the Medicines Act.

The Department of Health has replied to the Committee's representations that an index be included in the next edition of the Drug Tariff. The letter indicated that the Department was aware of the usefulness of an index which was frequently under review and that every effort would be made to include an index in the 1979 Drug Tariff. Representations have been made to the Department of Health that pharmacist contractors be informed of all endorsements by pharmacists on Form FP10 which are not accepted and passed for pricing in the processing divisions of the Prescription Pricing Authority.

It was agreed that representations be made to the Department to re-issue a note as an FPN to general practitioners drawing their attention to the requirement in their Terms of Service that they should issue a separate Form FP 10 for each patient. The Committee decided that representations should be made to the Department of Health that the telephone number of the doctors surgery should be included on Form FP10.

The Committee considered the document "Health Centres and Other Provisions for Primary Health Care" in the light of the draft comments from the Pharmaceutical Society. The PSNC considered that comments to the Department of Health might be more effective

if they were in the form of an agreed document with the Pharmaceutical Society and it was agreed that the matter be discussed with the Society.

Written comments had been received from 26 Local Pharmaceutical Committees of which 25 have indicated endorsement or acceptance of the Report and one had rejected it.

'Which?' looks at the nappy market

The main advantage of towelling nappies is their cost, says a *Which?* report this month. But they are hard work—2,000 nappies a year could be washed and by using a washing machine and tumble drier the cost difference between towelling and disposables lessens considerably.

Disposables are more convenient but the report says buying them—at least three packets of 10 a week—and getting rid of them (see *C&D*, October 8, 1977, p533) are two disadvantages. Also, as they do not hold as much liquid as towelling nappies, disposables could need changing more often, for example at night.

Which? tested 18 towelling nappies, 20 disposable nappies and 20 nappy liners (10 disposables, 2 one-way, 5 washable one-way and 3 muslin).

It decided that best buy for towelling nappies was Boots de luxe at about £10 for 12. A panel of mothers was used to test some of the products and Golden Babo bambi, overnight size, were the most popular of the ordinary disposable nappies. They found that Paddi Pads were too wide and tended to leave cotton wool fluff on the baby's bottom. Mothers particularly liked the larger sizes of Curity Snugglers, says *Which?* and preferred them to ordinary disposable for convenience.

CHCs want pharmacy site control for consumers

The Association of Community Health Councils for England and Wales recommends consideration be given to control of retail pharmacy locations by machinery akin to the Medical Practices Committee. Control should be in the interests of the consumer, the Association stresses.

In its evidence to the Royal Commission on the National Health Service the Association draws on information from over 70 member CHCs. The issues include:

- Shortcomings in the organisation of pharmaceutical services, especially location of pharmacies and the planning of "out of hours" service;

- The impact of health centres, group practices and supermarket sales on the ability of small pharmacies to stay in business;

- Absence of facilities in urban redevelopment areas, new residential areas and large villages.

The dual possibilities of support from the Department of Health and local authorities (for example, rate relief) to assist new pharmacies or pharmacies in key locations and the use of salaried pharmacists as locums or in health centres, including the option of salaried employment within the Family Practitioner Service emerged among the solutions to be envisaged. The Association points out that it is only the number of pharmacies which is diminishing, not the number of practising pharmacists.

Other influences

Among other influences to which the Association draws attention are the economics of small businesses, and the poor quality of public transport. The remedies should buffer the health care element of pharmacies against simple market forces, and should enable transport problems to be circumvented, for example, by alterations to regulations to enable more effective collection and delivery services including mobile pharmacies.

For the user, the evidence says, the two principal requirements are a source of advice on self-medication (sometimes of some urgency) and the ability to have a prescription dispensed within reasonable walking distance (or an inexpensive bus journey) of home. The informal advisory service of the professional pharmacist is a highly valued contribution to primary care and relieves pressure on general practitioners and hospital casualty departments: its survival is of considerable importance to the population as a whole.

"It is also highly disturbing that new communities in outer-suburbs and villages with populations of many thousands are

not proving adequate to support a flourishing pharmacy. Evidence from inner areas of London and Manchester provides the other side of this worrying coin: deprived parts of major cities come into the same category as their communities decline and costs increase to the point where independent pharmacies can no longer survive.

"We are of the opinion that a number of relevant questions require study, and would instance: increased dispensing fees; grants and subsidies from central and local government; salaried service; use of hospital and health centre dispensaries; guidance to health and local authorities on the planning and location of health centres, surgeries and phar-

macies; rate implications for local authorities; and the collection and distribution of medicines, equipment and appliances, and safeguards necessary. We urge the Royal Commission to have studies, and perhaps a limited number of demonstration projects and pilot schemes instituted, to test some of the possible solutions in the public interest, and to publish the results with its eventual findings."

Cost of appetite suppressants

Scottish pharmacists are being sent an information leaflet on appetite suppressants and their cost to the National Health Service in Scotland. The leaflet, from the Scottish Home and Health Department, lists the drugs by brand and generic name and says the total cost in 1975 was £470,000. A quote from the 1976-78 British National Formulary, to the effect that there is no substitute for willpower is also included.

New warning labels for chemicals

Suppliers of about 800 listed dangerous chemicals, used mostly in industry, but some in the home, will be legally obliged to put warning labels on containers under Regulations laid before Parliament last week. Containers must also be properly designed, constructed and secured to prevent accidental spillage during use.

The Packaging and Labelling of Dangerous Substances Regulations (SI 1978 No 209, HM Stationery Office, £1) implements within Great Britain an EEC Directive on the packaging and labelling of dangerous substances. Eventually the list will be extended to products containing a proportion of the chemicals. Implementation will be in two stages according to container size. Suppliers have until September 1, 1978 to label containers with a capacity of 200 litres or more and, until March 1, 1979 containers with a capacity of less than 200 litres.

The scheme should enable users of acetaldehyde, concentrated nitric acid, hydrofluoric acid and acetone, for example, to gain quick but important guidance on the main dangers and how to handle and use them safely. Sodium hydroxide, formic acid, sodium chlorate and sodium hypochlorite are examples of home use substances covered.

The principal feature of a label is a pictorial symbol accompanied by a key word. A symbol shows, where possible, the likely dangers of the chemical and is printed in black on a bright orange to yellow background. Every chemical, listed in a Schedule to the Regulations, is classified according to the hazard or hazards it presents: highly flammable, toxic, corrosive, flammable, oxidising, irritant and harmful. Each hazard category has its own symbol: an exploding bomb for explosive substances; a flame over a circle for oxidising substances; a

skull and crossbones for toxic substances; a flame for highly flammable substances; a hand and piece of metal being dissolved by liquid dropping from two test tubes for corrosive substances, and a St Andrews Cross for irritant substances.

In addition the Regulations require each label to carry: one or more risk phrases such as "Very toxic in contact with the skin"; one or more safety phrases such as "Wear suitable protective clothing"; name of chemical and name and address of supplier.

The responsibility for labelling containers will rest with the supplier. Manufacturers or importers will be required to attach labels before supplying directly to other manufacturers or before supplying wholesale or retail outlets. Those outlets will still have an obligation to ensure that products are correctly labelled before selling them to users, but in practice it is expected that manufacturers' labels will remain on containers. Wholesalers or retailers who re-package must attach their own labels.

Minimum sizes are specified for the labels depending on container capacity but there will be room for manufacturers to put brand names and other information elsewhere on the container. Where a substance is required to be labelled under both these regulations and under existing transport rules, allowance is made for a single label to be used which shows the requirements of the appropriate transport rules and certain provisions of the new Regulations.

Enforcement of the Regulations will be carried out by health and safety inspectors except, in the case of shops and registered pharmacies, they will be enforced by local authority weights and measures inspectors and the Pharmaceutical Society of Great Britain respectively.

Dr. White's and Panty Pads

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FIRST PRIZE

Fibreglass
Sailing Dinghy
(Or £375)



5 SECOND PRIZES

Golf clubs worth
£150



75 THIRD PRIZES

Debenhams Voucher
worth £25



£3,000 worth of prizes must be won. Turn the page...

To collect your share of our £3,000 Spring Collection, just display Dr. White's and Panty Pads.

HOW TO ENTER

1. To qualify for entry into the Trade only "Spring Collection" display competition you must be a retail stockist of Lilia-White Sanpro products.

2. You must feature Dr. White's and Dr. White's Panty Pads in your display.

3. Using floor and/or shelf space in your store, build a selling display of the above products. Remember, it is just as important to keep your shelves well filled as it is to build an off-shelf feature display.

4. You, or your Lilia-White representative must submit a photograph of your display (signed by you on the back) together with a completed entry form by April 15th 1978 at the latest.

5. Complete the tie breaker sentence - "It pays to display Dr. White's and Panty Pads because" in an apt and original way using no more than 12 words.

REMEMBER.

The judges will be looking for...

A. Good display features of both Dr. White's and Panty Pads.

Remember, Panty Pads is now available in three absorbencies.

B. Striking and effective presentation.

C. Intelligent use of available space.

D. Effective use of display material.

RULES

1. This competition is open only to bona fide retail trade stockists of Lilia-White Sanpro products who are permitted by their employers to enter such competitions.

2. The how to enter instructions form part of the rules.

3. The prizes will be awarded in order of merit to the 81 entrants who in the opinion of the judges have submitted photographs of displays that meet the criteria outlined in A-D. In the event of there being more than 81 such entries the tie breaker sentence will be taken into account.

4. Competition closes April 15th 1978.

ENTRY FORM

To be completed by the customer and handed to your Lilia-White representative, (if applicable) or sent direct to:- Lilia-White "Spring Collection" Display Competition, P.O. Box 64, Maidenhead, Berks.

Complete this sentence (using not more than 12 words) "It pays to display Dr. White's and Panty Pads because _____"

I enclose a signed photograph, taken in my shop, of a display of Dr. White's and Panty Pads.

Retailer's Name _____

Address _____

Representative (if applicable) _____

CD1

PEOPLE

Mr Edgar A. Hebron, FPS, of New Chester Road, New Ferry, Wirral, Merseyside, has been elected first chairman of the newly-formed Merseyside Council of the National Chamber of Trade. He was also the first chairman of the Bebington Chamber of Trade when it was first formed.

Mr David Sharpe, MPS, member of the Society's Council has been co-opted onto the council of the Institute for the Study of Drug Dependence. The Institute aims to collect, collate and disseminate information on all aspects of drug dependence. Most members of the council are doctors and Professor Fairbairn, of the School of Pharmacy is the only other pharmacist member.

Mr Peter Phillpotts, FPS, should have been included in the list of names submitted by the Pharmaceutical Society to the Ministry of Agriculture Fisheries and Food for possible appointment to the Veterinary Products Committee (last week, p256). The full list, in order of preference, is Mr Lane, Mr Phillpotts, Mr Dalglish and Mr Jobson. The Society is still pressing for the inclusion of two pharmacists on the Committee.

Mr John Curtis, chairman and managing director, William R. Warner & Co Ltd and associated companies, has retired after 22 years with the Warner-Lambert organisation. He will continue his association with the company on a consulting basis. After a short time with Savory & Moore Ltd, he joined Burroughs Wellcome & Co in 1938 as assistant advertising manager, later becoming marketing manager. In 1952 he was appointed director and marketing controller of Bengel Ltd and Bengel Laboratories, leaving in 1956 to join William R. Warner & Co Ltd. He has served on many committees of the Association of the British Pharmaceutical Industry and was designated an Honorary Fellow of the Pharmaceutical Society in 1976.

Deaths

Dickinson: On February 25 Frances Dickinson, PhC, 70 Windmill Street, Whittlesey, Peterborough.

Macdonald: At Kilmarnock Infirmary on February 26, James Alexander Macdonald, MPS, 35 High Road, Stevenston, Ayrshire. Mr Macdonald qualified in 1938.

Westland: On March 1 William Westland, MPS, FSMC, 35 Irvine Road, Kilmarnock, Ayrshire. Mr Westland qualified in 1923.

News in brief

□ The British Dental Health Foundation headquarters address is now 2B Ravensdale Avenue, London W12 9HS, telephone 01-445 5547.

□ Bactigras tulle and Ortho Gyne T contraceptive device are added to the Scottish Drug Tariff in the March revision of prices supplement.

TOPICAL REFLECTIONS

by Xrayser

£450m for a couple of meals

I have been picked up on my suggestion that we pay our negotiator a decent salary, but did you realise that I proposed some £40,000 a year? No? Well let's push the idea a little. It will be accepted I hope that for Joe Gormley to be a first rate fighter for better terms for the miners it was not essential that he continued to work at the coal face. Indeed the miners long ago recognised the need for their representative to be freed from financial problems and the fatigue and worry of earning his bread in the pit, for they would be crippling distractions from his most important work.

Those of you familiar with Machievelli will recognise that although they would wince at the words, the miners have elected a Prince, which by definition means here, someone to whom authority is delegated but whose authority is retained by common consent. And a Prince, to be effective, must have the wherewithall not to have worries about his next meal or his old age. In today's society we see many princes, Prince Jenkins, Prince Murray, Prince Gormley and Prince Wright OBE.

If we expect to realise our ambitions and the full potential of our man we have now to make sure that he hasn't got our worries—doubled.

We seem quite unaware of the magnitude of the job. Do you know that the value of the contract is in the order of £450 millions? PSNC expenses amount to about $\frac{1}{2}$ per cent, that is some £240,000 but the chairman—our man—at present can hardly cover his costs for as far as I can see he gets nothing but some miserable expenses, certainly less than £20 in return for three or four days a week. My, we do ourselves proud for the price of a couple of meals out and a little petrol.

How do we get our Prince?

As you know I have been challenged with my own question. How? I'm not entirely sure, but it would seem logical to build on what we already have. We have a negotiating body and we have an executive team led by Alan Smith. What I now suggest is that the chairman should also be a full time paid leader and servant. If he happens to be a man who like me runs a small single pharmacy then plainly it is our responsibility to see that he is paid enough to employ a manager of top calibre, so that he can safely put that worry behind him. It is our responsibility to pay him well, commensurate with the responsibility we are giving him, and to see to his old age. That done, he becomes accountable to the committee, but his term must be long enough to work through a long term strategy.

As a means of testing contractors' opinion I would suggest that the PSNC should include in their next glossy mailing, a fold-up-and-post sheet (prepaid?) like those order sheets we get from time to time, with a questionnaire, posing, say, half a dozen important questions. Over to you . . .

Baby feed

Over the years I have been treated as a heretic by some of the professionals involved in baby care because I advocated that women should have their babies at home and should feed them themselves. And I was most unpopular with one who advised cereal as a bottle supplement at three months, when I told the mother the child could not digest it.

As a boy I saw the beauty and utility and delight in the full acceptance of our animal nature in things animal. May I congratulate C&D on the article in the recent Baby Supplement in which was printed, surely for the first time in 50 years, the advice that at birth the baby should be put to breast, and kept with the mother for the whole time, being fed when the breast needed ease or the child wanted it. I see real advance in this return to the ways of nature.

COUNTERPOINTS

Just for nails—range identity from Cutipen

The lack of range identity in the nail care market is to be exploited by Fulford Williams next month when they launch



a range of five products under the brand name Just for Nails "by Cutipen".

The company's market research has shown substantial growth in the market over the past three years—from £1.9m in 1975, £2.5m in 1976 and £3m in 1977 (this is solely nail care and does not include nail colours). With 90 per cent of women using nail care products there are 22 million potential customers.

The first two products in the range are the existing Cutipen and Nutrinail which have been given a face lift in elegant black and silver packs. These products appear as Just for Nails lanolised cuticle remover and vitaminised nail cream. Completing the range are gentle nail polish remover (containing lanolin to condition the nails whenever polish is removed), anti-nail biting lotion (invisible, colourless and odourless) and three-way nail protector. The protector may be used by itself as a single or double coat to give a clear shine and protect against dirt and detergents; it may also be used as an undercoat to

aid nail polish adhesion and prevent nail discolouration, and as a top coat to prevent polish fading and chipping.

Each product in the range is designed to sell at £0.65 with a 10p-off introductory consumer offer—to which attention is drawn on the counter dispenser units. The initial design theme shows a woman in a fur coat with bunches of bananas where her hands should be with the copy line "You know how it feels if your nails aren't right". *Fulford Williams (International) Ltd, Cornwall Road, Hatch End, Pinner, Middlesex.*

Unichem 'bargains'

Unichem are offering customers nearly thirty nationally-promoted products from March 13-29 in addition to the "Castaway Prices" promotion. The "Bargain buys" are: Allurell hairspray; Astral cream; Band-Aid clear and wash-proof; Brut 33 after shave & pre-electric shave; Colgate Dental Cream; Cussons Imperial Leather soap; Dentu-creme;



Libra—new sanpro launch from Bowater-Scott

Disprin; Elastoplast stretch fabric and washable dressing strips and Mr Bump; Kleenex Boutique; Kotex Sylphs; Listerine; Nail cream and lotion; Paddi Pads; Phensic; Radox salts; Second Debut CEF 1200 double strength; Seven Seas cod liver oil capsules; Sunsilk hairspray; Sure aerosol; Sure roll-on and refill; Twice as Lasting hair set; Vaseline petroleum jelly; Wilkinson Sword Bonded blades; Wilkinson Sword Close & Easy disposable razor. *Unichem Ltd, Crown House, Morden, Surrey.*



Libra, an addition to the Libresse range, is Bowater-Scott's first major product launch in the sanpro market since its joint venture with Mölnlycke.

The new press-on towel is produced in two sizes, regular (introductory price, £0.23) and super (introductory price, £0.26) both packed in 10s. An "8p off next purchase" coupon is included in the introductory packs.

Advertising support is claimed to be "the weightiest ever for a sanpro launch" and is mainly based on *Woman, Woman's*

Own, Jackie, Argus Three, 19, Cosmopolitan, Family Circle, She, O Boy, and Mates. Point of sale aids are available.

The product is aimed in particular at the 13-34 age group and the following improvements are claimed: Greater comfort because of its hydrous action (leaving the surface drier); more security because of the "basin-like" effect of the polyfilm backing. *Bowater-Scott Corporation Ltd, Bowater House, 68 Knightsbridge, London SW1X 7LR.*

Airbal campaign

A new national television campaign for Airbal will run throughout the month in all television areas. The two commercials which have been produced for this campaign both stress the refillable nature of Airbal and the three fragrances available—spicy lemon, natural and floral. *Smith & Nephew Ltd, Bessemer Road, Welwyn Garden City, Herts.*

Lilia-White display

Nearly £3,000 worth of prizes are to be won by any retail customer purchasing a minimum of five cases of Dr. White's and Dr. White's Panty Pads from Lilia-White. The competitor has to undertake to feature both products in a display and submit a photograph with the entry form. Closing date of the competition is April 15. *Lilia-White Ltd, Alum Rock Road, Birmingham.*



When it comes to corn caps, customers tend to choose a brand they trust. Which explains why Carnation is still the brand your customers think of when they think of corn caps. They know they work.

To make quite sure they get the message, we are, once again, promoting the brand heavily using *Women's National* Magazines and hundreds of bus interior sites.

The message is simple—Carnation—the gentle corn remover. From Chemists everywhere.

We thought you would like to know in advance so that you can stock up now.



Carnation Corn Caps.

Cuxson, Gerrard & Co. Ltd., Oldbury, Warley, West Midlands. B69 3BB. Tel. 021-552 1355.

COUNTERPOINTS

Miles distribute Newtons chiropody sponge

Miles Laboratories have been appointed exclusive sales agents for the Newtons chiropody sponge. The consumer products division of Miles will be using their field force to sell this chemist-only product. Newtons will continue their consumer advertising strategy in 1978, but will double the 1977 budget. The campaign will start in April. In addition Newtons have redesigned the sponge dispenser in a green colour and improved its display potential.

Newtons say that their confidence in the chiropody sponge is such that in future they will "make an unconditional money-back guarantee to consumers who are not absolutely satisfied with the product," and Mr Theo Van Dort, managing director of Newtons Laboratories, added "with 8 per cent or more of the population suffering from corns, callouses, or hard skin, we have barely scratched the surface of the market



potential for this simple and effective home treatment." *Miles Laboratories Ltd, Stoke Court, Stoke Poges, Slough SL2 4LY.*

Delial summer offer

A figure-hugging T-shirt and matching holda-bag will be available through a money-off collar coupon offer on Delial sun tan products from May onwards.

The all-cotton fawn T-shirt has a V-neck at the front, a scooped neck at the back and carries the Delial motif in brown. The price with a Delial coupon is £1.50 (plus 15p packaging and postage) against a normal retail price of about £2.50. The cotton-canvas bag, with its rope and wooden handles—which can be removed for washing—is said to be ideal for taking to the beach. There is a saving of about £2 on normal retail price.

The promotion is part of a £250,000 campaign being staged by Bayer UK Ltd Consumer Products Group to back Delial in chemists this summer. *Bayer UK Ltd, Consumer Products Group, Haywards Heath, Sussex, RH16 1TP.*

More Hard as Nails

Sally Hansen have introduced four new shades into the Hard as Nails range. The four shades are scarlet red, chocolate brown, ruby wine and soft chestnut making 26 shades in the range. A selfasta unit for 11 bottles is also available. *Sally Hansen Ltd, Hook Rise South, Surbiton, Surrey KT6 7LU.*

Dixcel Downies on TV

British Tissues are using television advertising in the Southern and Tyne Tees areas to promote Dixcel toilet rolls. To explain the softness of new Dixcel,

British Tissues will be using a set of characters called the Dixcel Downies in the advertisements.

The campaign also includes 100 spots on local radio in Southern and Tyne Tees areas, and a coupon drop to 1.4 million homes featuring a "5p off next purchase" voucher. The campaign continues in the autumn when other television regions will be added. *British Tissues Ltd, 101 Whitby Road, Slough.*

The crimper for the new look

A hair crimper, already claimed to be a success in France, has been introduced into the UK by Babyliss. The crimper (£24.95) is a lightweight, easy to hold unit consisting of two heating plates,

each with five small undulations. Once the operating temperature is achieved, it is maintained and Babyliss say the crimper can be used to give body and fullness to hair by crimping the under layers, then smoothing the top section over. On long hair, just the ends may be crimped. *Distributors—Standrig Son & Co (Hull) Ltd, 101 Spring Bank, Hull.*

Tissues for piles on test market

Cleansing tissues for haemorrhoid sufferers have been introduced by International Chemical Co. Preparation H cleansing tissues contain glycerin and witch hazel and are individually foil-wrapped in five strips of two tissues (£0.35). The tissues are available on test market in Yorkshire and will be supported by advertising in the local Press from April. The company says display at point of sale is essential because haemorrhoid sufferers are shy about their condition, so outers containing 12 units are provided. *International Chemical Co Ltd, Chenies Street, London WC1 7ET.*

Allurell trial size and TV campaign

A 60g trial size (£0.39) of L'Oreal's Allurell hair spray will be available from mid-March. Also 6 million 10p coupons are being distributed door-to-door from March 13 for three weeks. These coupons will be redeemable against all three sizes of Allurell spray—60g, 135g and 300g. The coupon offer closes at the end of July. To back up the promotion a national television advertising campaign for Allurell begins March 13. *Golden Ltd, 18 Bruton Street, London W1A 1BX.*



The new Babyliss hair crimper in use—it can give body and fullness to hair by crimping the under layers and smoothing the top section or, on long hair, just the ends can be crimped in line with to-day's fashion dictates

IF YOU GET BACKACHE RE-STOCKING YOUR SHELVES WITH LLOYD'S CREAM, YOU'LL KNOW WHAT TO USE.

You'll be feeling the effect of Lloyd's Cream more than anyone this year.

For a start there's a brand new press advertising campaign aimed specifically at active sportsmen as well as the older user.

You'll find also that Lloyd's Cream now has distinctively new packaging and, as it's now on the General Sales List, you can put it on open display for the first time.

There are also other changes.

Lloyd's Cream has been reformulated with an analgesic* so that your customers will find it an even more effective treatment for muscular aches and pains.

And there is a new 60g tube, as well as the existing 30g tube and 100g jar.

It's still odourless, doesn't tingle or redden the skin.

Which is just as well should you end up using a jar or two yourself.

LLOYD'S CREAM 

Made in Britain by Reckitt & Colman Pharmaceutical Division, Hull.

*Diethylamine salicylate.



COUNTERPOINTS

Radox garden tool offer



Nicholas Laboratories are supporting Radox salts with a consumer garden tool offer. For two or three months a limited number of packs will carry the offer which has been arranged with Stanley Garden Tools and Percy Thrower. Customers could save about £2.25 on the set of a steel hand fork and trowel said to retail normally at £9. The tools will also be available singly to Radox purchasers at £3.75 each. The offer will also include a free autographed copy of Percy Thrower's "Gardening Year". Nicholas are backing the promotion with Press advertisements and point-of-sale material featuring Percy Thrower. Special trade bonuses will also be available. *Nicholas Laboratories Ltd, 225 Bath Road, Slough, Berks SL1 4AU.*

PLJ's Miss England

PLJ is again sponsoring the Miss England contest in conjunction with Mecca Ltd. The final in London on April 5 will be televised live by the BBC and will be watched by an estimated 24 million viewers. The winner of the "PLJ Miss England" title, will receive a £5,000 first prize. The heat winners and the finalist will be engaged in extensive series of personal appearances for PLJ, in "key grocery and chemist outlets," according to the manufacturers. *Beecham Foods, Beecham House, Great West Road, Brentford, Middlesex.*

Carmen shaver

The House of Carmen have introduced the Smoothline ladies' shaver (£10.95). It is battery operated and described as a "slender and feminine shaver" which will "sit prettily alongside dressing table toiletries". It is also said to be small and lightweight enough to pack in a

handbag. The Smoothline ladies' shaver has a very narrow top for easier access to underarm hair and two blades, one straight and one contoured. The straight blade is recommended for use on legs. *House of Carmen Ltd, Carmen House, Deer Park Road, London SW19 3UX.*

French Easter

Two Easter presents are offered by French Almond. A free mini talc and hand cream or a tablet of soap are offered with purchases of French Almond spray cologne (£1.20). *French & Scott Ltd, 717 North Circular Road, London*

Tabac gifts

Tabac Original are featuring four offer packs this month. A free deodorant stick, travel soap, deodorant spray or shampoo will be offered with each Tabac Original after shave (£2.15). The products will be in duo packs. *Eylure Ltd, Grange Industrial Estate, Llan-frechfa Way, Cwmbran, Gwent.*

ICML introduce new ranges

Independent Chemists Marketing Ltd, are introducing low calorie fruit drinks, more Nusoft baby products and Ballito tights into their range.

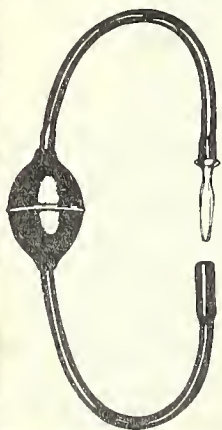
Sunpure low calorie drinks will be launched in two flavours—orange and lemon—in 1 litre bottles (£0.26). Chemists will be offered a discount of £0.23 per case of 12 during the launch period. Six-oz sizes of concentrated orange juice and rose hip syrup (£0.27) will extend the Nusoft baby range and are packed in new style "dumpy" bottles. ICML are also distributing Ballito tights in micromesh (£0.29), run-resist one size in light, medium and dark (£0.31), and lightweight support in light, medium and dark (£0.99). *Independent Chemists Marketing Ltd, 51 Boreham Road, Warminster, Wilts BA12 9JU.*

ON TV NEXT WEEK

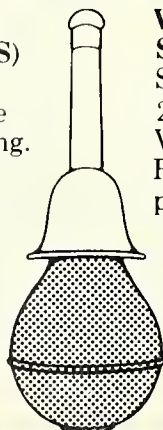
Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east; A—Anglia; U—Ulster; We—Westward; B—Border; G—Grampian; E—Eireann; CI—Channel Island.

Airbal: All areas
Allurell: All areas
Anadin: All except U, E
Alberto Beyond: All except E
Askit powders: Sc
Clearasil: All except U, B, CI
Fresh 'n Clean: Ln, So
Head & Shoulders: Ln, Y, Sc, A, U, G
Harmony hairspray: All areas
Marigold housegloves: Sc, WW, U, G
Mavala: M
Nice 'n Easy: All areas
Philishave: All areas
Sally Hansen Hard as Nails: Ln, So, M, A, We, G, Sc, U, G
SR: All areas
Seven Seas cherry flavoured cod liver oil: M
Unichem: All except U, E, CI
Vitarich: Lc

Personal health sundries from Saffron



Higginson's ENEMA (NHS)
All-plastic with one-piece bulb and tubing. Rectal and vaginal pipes and shield. Rec.w/s price £1.72



WHIRLING SPRAY
Standard pattern. 2-piece pipe and Vonda ring. Rec.w/s price £2.38

All goods supplied in 2-colour printed carton.

Saffron pattern BREAST RELIEVER (NHS)
New shape for greater comfort and ease of use. Gentle action PVC bulb. Rec.w/s price £1.36

Saffron pattern VAGINAL SYRINGE
One-piece pipe and Vonda ring. Easier to use. A quality product at a lower price. Rec.w/s price £1.52

Ask your usual wholesaler about the complete range of Saffron products.



Saffron

5 Rowlands Road Worthing
West Sussex BN11 3JJ
Telephone Worthing
(STD 0903) 34034

Lobidan to be discontinued

Lobidan is to be discontinued from the end of May because when the Medicines Act Part III is fully implemented the product will become a Prescription Only medicine. Returns will only be accepted after August 1. *Berk Pharmaceuticals Ltd, Station Road, Shalford, Guildford.*

Merocet gargle reformulated

Merocet gargle and mouthwash has been reformulated to double the strength of the active ingredient (200ml, £0.52). The new formulation contains cetylpyridinium chloride 0.05 per cent and alcohol (95 per cent) BP 14.75 per cent w/v, and may be distinguished by "improved formula" on the label. The flavour is unchanged. Richardson Merrell Ltd, say the new formulation has been shown to be of considerable value in the prevention and reduction of dental plaque. No credit will be given on returned stock and the manufacturer asks retailers to exhaust existing stocks. *Merrell Division, Richardson Merrell Ltd, 20 Queensmere, Slough, Berks SL1 1YY.*

Dietary soup

Cantassium cholesterol-free tomato soup mix (100g, £0.61) is made only from dried tomato powder, fructose, potato flour and natural flavourings. Each pack makes almost two pints. The mix is free from gluten and low in sodium and saturated fat. *Cantassium Co, 225 Putney Bridge Road, London SW15.*

Insecticide powder for vegetables

Secto have introduced a vegetable insecticide powder (150g, £0.43) containing lindane and diazinon. It is recommended for control of greenfly, whitefly, blackfly, caterpillars, red spider mites, thrips, sawfly, flea beetle, capsid, leafhoppers, raspberry and loganberry beetle. *Secto Co Ltd, Carlinghurst Road, Blackburn.*

Poppex for Mycil

Metal Box has won its first major order for Poppex—a closure for one handed opening—from Duncan, Flockhart Co Ltd. The closure will be used for Mycil powder and DF expect the design to minimise powder sifting problems and give maximum protection against moisture vapour. Because it is a derivative of Poplok, the child-resistant closure, Poppex is unlikely to be opened accidentally by very young children Metal Box say. *Metal Box Ltd, Queens House, Forbury Road, Reading RG1 3JH.*

PRESCRIPTION SPECIALITIES

Sinthrome changes

The sizes of Sinthrome packs have been changed to 1 mg in 200 (£1.40 trade) and 4 mg in 100 (£1.49 trade) with the 500 packs being discontinued. *Geigy Pharmaceuticals, Hurdsfield Industrial Estate, Macclesfield, Cheshire SK10 2LY.*

Orders cancelled

Prenomiser plus has been discontinued and all outstanding orders cancelled. *Fisons Ltd, Pharmaceutical Division, 12 Derby Road, Loughborough, Leics.*

SOMNASED tablets

Manufacturer Duncan Flockhart & Co Ltd, Birkbeck Street, London E2 6LA

Description White, scored tablet engraved with Somnased on one side, containing nitrazepam 5 mg

Indications Sleep disturbance

Dosage *Adults*—5 to 10 mg before retiring. Dose may be increased to 20 mg for in-patients. *Elderly patients and children*—2.5 mg to 5 mg

Contraindications, etc As for other nitrazepam preparations

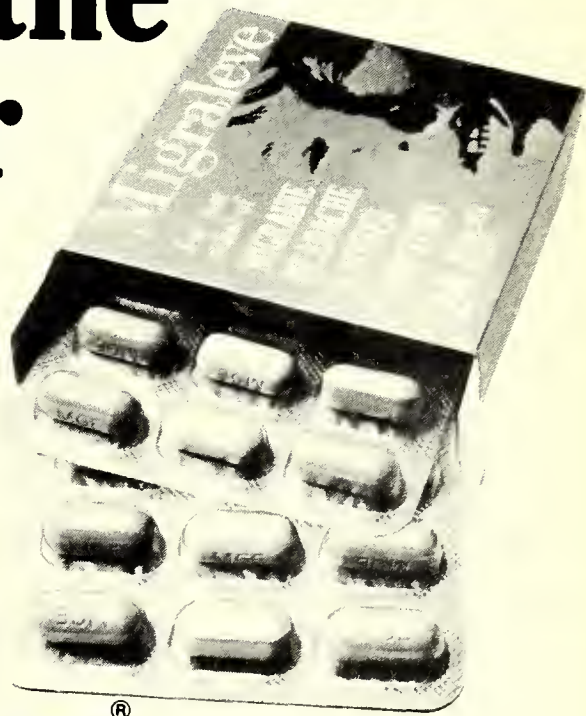
Packs 100 and 500 tablets (£1.47 and £5.90 trade)

Supply restrictions Prescription only
Issued March, 1978

Non-ergotamine Migraleve is the one anti-migraine specific you may sell over the counter

Sales (and prescriptions)
are still rapidly rising.
So check your stocks now.

Over half a million
prescriptions for
Migraleve have produced
no adverse reports.

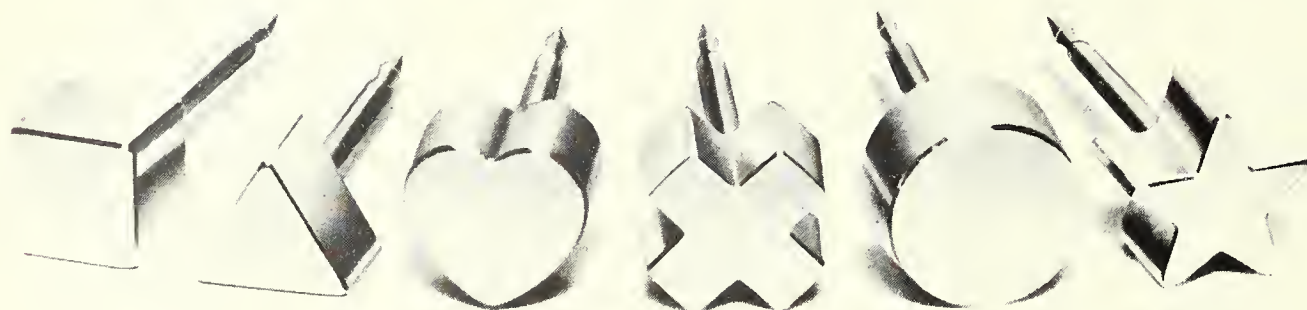


NON-ERGOTAMINE
Migraleve®



International Laboratories Ltd. Lincoln Way, Windmill Road, Sunbury-on-Thames, TW16 7HN.

The ear piercing stud is dead.



Now there are

FRILLS

There's nothing less fashionable than the old fashioned ear piercing stud.

Just ask the woman who has to wear a pair for 4 to 6 weeks. She'll tell you how square that ball is.

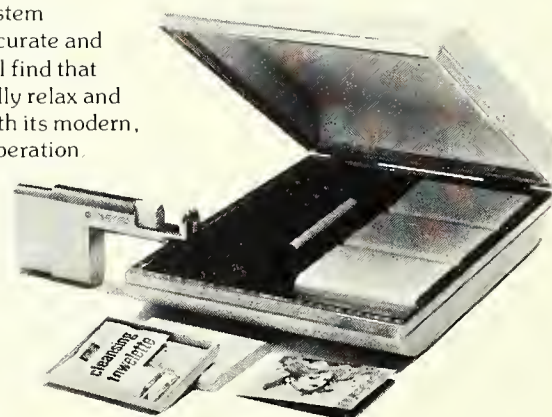
So Inverness has designed a most fashionable alternative, a beautiful line of new shapes to pierce ears with in place of the usual, dull stud.

We call them Frills. And they come in six basic shapes: Stars, Hearts, Kisses (X), Triangles, Circles and Squares. They are available in 24 Karat gold plate over hypo-allergenic stainless steel. Each pair of Frills comes packaged in our patented 100% sterile disposable capsules and cassette.

Frills are designed to give you a real competitive edge, a unique product you can advertise and sell to a wide range of new customers. Can you imagine any young girl or woman settling for an old fashioned stud once she knows about Frills?

And don't forget our regular collection of ear piercing ball earrings in 13.5 karat gold, 24 ct gold plate and hypoallergenic stainless.

GET THE SYSTEM. If you're not already acquainted with the Inverness System, you've got a real surprise. Because we've taken ear piercing out of the middle ages. Our modern polished chrome piercing instrument and 100% sterile earring cassettes form a system that's safe, fast, accurate and painless. And you'll find that your customers really relax and feel comfortable with its modern, efficient look and operation.



Frills are available in dozens made up of any assortment of styles you select at £29.50 per dozen plus VAT.

Buy 2 dozen equal assortment and we'll give you a gift-boxed set of the 6 above (singles not pairs - limited to one set per Salon).

Complete Inverness piercing kits start at £29.00 and if you would like a brochure or demonstration:

Telephone Windor 51336 or send in the coupon below.

INVERNESS

The only alternative

LOUIS MARCEL LTD., 12 Bexley Street, Windsor
Tel: Windsor 51336

Please send me an Inverness Brochure ☐
Please send me dozen Frills ☐
(equal assortment) @ £29.50 plus VAT
Please telephone me to arrange a demonstration ☐

Name.....

Address.....

Telephone.....

Should we abandon our agencies?

Graham Walker calls for a new deal from the cosmetics and perfumery houses

Some three years ago I wrote an article for *Retail Chemist* entitled "Why bother with cosmetics?" and, within it, questioned the profitability of the existing cosmetics and perfumery operations in the independent sector of retail pharmacy. I further challenged the validity of so-called "agencies" which seemed to be one-sided agreements biased against the retailer—the dice seemed heavily loaded in favour of the cosmetic manufacturers. Each year, following the original article, I have written an annual assessment of individual company's performances. In this article I shall attempt to reassess the future of agency cosmetic distribution.

The ideal agency

Let us start by examining the features we, as retailers, would like to see in a fair and equitable system of distribution of cosmetics on a limited agency basis.

1. Companies should be able to estimate the size of the market for their products and translate that statistic into a specified number of outlets. This number would vary between, say the 250 for Estee Lauder to say 10,000 for Max Factor. The significance to the retailer would be that we would know the potential size of our markets and the level of competition we could expect from other outlets. On this basis we could then take rational decisions on the investment involved in taking, or maintaining, a cosmetic agency. We would not expect the number of outlets to change unless the company could show that such a change was necessary to reach agreed marketing objectives.

2. In return for limitation of distribution through a specified number of outlets, we, the agents, would agree to stock the company's full range with the exception of those products which our stock control books revealed could not achieve an agreed minimum rate of stock-turn (eg, twice a year on a retail to retail basis).

3. On return for limitation, we, the agents, would further agree to accept and fully support all promotions, including Christmas, with agreed quantities of stock subject to an agreed sale or return arrangement.

4. We would seek to achieve a minimum gross margin of 35 per cent on return in recognition of the slow rate of stock-turn and depreciation of stock.

5. In return for our support we would expect the company to provide us with a level of service in the form of representatives, consultants, window displays, testers, etc, commensurate with the size

of our financial commitment to the company.

6. The agreement should be renewable annually with three months notice of termination necessary by either side. In the event of termination by either side, we would expect to see 100 per cent credit passed for the return of any remaining stocks.

The reality

Those are the basic features which I believe most retail pharmacists would like to see, but how do they measure up in reality? After a lot of thought, research and bitter experience, I have come to the conclusion that, with a few exceptions, the majority of companies are coming to regard their agents, at best as necessary evil but more usually as a channel of distribution to be tolerated only until their products are big enough to go into every multiple warehouse.

Two months ago I wrote a few words in which I suggested that since the multiples now seem to have Revlon's Charlie fragrance in their warehouses, any independent pharmacy that would like supplies of Charlie fragrance, without the encumbrance of a Revlon account, could obtain them simply by writing to me. Little did I anticipate the response which those few words would provoke. Throughout the UK scores of pharmacists contacted me for supplies and not surprisingly, without exception they all wanted the sprays and talc. Oddly enough, these were the same products which now seem to appear on

the shelves of every multiple. The principle which the multiples follow seems to be quite simply: stock the best sellers only, in minimum quantities, available ex-warehouse on a weekly basis. Compare that as a business proposition with the range of stock that the typical independent outlet has to carry simply to get his Charlie sprays.

What also emerged in the correspondence was that over the past few years the agency principle has insidiously been eroded by many companies other than Revlon. So, in order to ascertain for myself the extent of the increase in distribution of former agency products, I took an afternoon trip to a medium-sized branch of a multiple chemist. Since all the stock was on self-selection I was able to get some idea of what really is happening. Briefly, the branch seemed to be stocking the best sellers only from the following companies: Faberge (Brut Original and Kiku); Coty (L'Aimant sprays); Lenthéric (Tweed and Tramp sprays); Tabac (after-shave); Revlon (Charlie sprays and talc); Worth ("Je Reviens" sprays); Shulton (Old Spice and Blue Stratos after-shave); Houbigant (Musk and Essence Rare). In fairness I ought to add that I had no evidence to show that this stock was "ex-warehouse" but it did seem fairly clear that this multiple is not subjected to the same pressure to stock large ranges of slow-moving ancillary products as are their independent counterparts. Oddly enough they did seem to be stocking

Concluded on p352



Abandon the agencies?

Concluded from p351

complete ranges of Max Factor and Yardley products.

To emphasise the emergence of new distribution policies one only has to open the *Sunday Times* of February 26, 1978, and find the double-page spread devoted to a B--ts Mothers Day promotion. There one would see Jontue (Revlon), Tweed (Lenthéric Morny), French Almond (Eylure), Kiku (Faberge), L'Aimant (Coty), Essence Rare (Houbigant), Aviance (Prince Matchabelli), available in "B--ts exclusive packs" available "from most B--ts branches while special stocks last". If anyone needed evidence that the name of the game has changed, there it was for all to see.

So much for our cherished "agencies"! But don't blame "B--ts". They, like us, are only in it for the money! It is the companies involved in the promotion who have coerced the independent sector into stocking large, unprofitable ranges on the basis of "agency" distribution. It seems to me that the decks should now be cleared for a stand-up fight between the independents, small multiples and the so called "agencies". However, before suggesting the course of action which we should follow I ought to make it clear that there are some companies which still show every sign of wishing to retain and observe agency agreements. These include Elizabeth Arden, Helena Rubinstein and the French perfumery houses. Those companies which have chosen to stick with us should be supported heavily in terms of stock, shelf space, display and promotions, whilst the others need special treatment.

A new policy

How then should we react to the clearly dramatic change in the distribution pattern of perfumery products? May I suggest that:

1. We must recognise that our competition is no longer each other, but instead we are now fighting the big battalions of Boots, British Home Stores and Woolworths. Accordingly we must cast aside our petty jealousies and realise that, unless mass market fragrances are available to all independents on the same terms as they are to multiples, then the credibility of the independent sector as a channel of distribution will be irredeemably damaged.

2. We must ask each supplier of cosmetics and perfumery for a clear unequivocal statement of his distribution policy. Without this information we are working completely in the dark, investing badly probably 50 per cent of pharmacy's working capital. When we know exactly where we stand, we can then take rational decisions on which companies to support.

3. We must call on all major cosmetic companies to make supplies available to bona fide chemist wholesalers, and independent accounts on the same terms as they appear to be supplying the major multiple. It is high time we demanded equity to enable us to carry similarly low stocks of the fast moving lines and discontinue stocking the shelf warmers.

To conclude, we would be well advised to remember that time is fast running out for the independent sector and it is the responsibility of each one of us to call upon our trade association, the National Pharmaceutical Association, to use its substantial potential to protect and expand our interest in the vital area of cosmetic retailing.

Agricultural and veterinary pharmacy—new series

Faults in the Act

by Foxglove

The introduction by C&D of an agricultural and veterinary column as part of its programme of development is particularly welcome at this time. Publicity for this branch of the profession has been lacking for the obvious reason that those members actively engaged have been very much fewer in number than those engaged in urban community pharmacy.

An important point for all pharmacists to realise is that the gross value of the national sales of animal medicines is a much higher proportion of the total medicines produced than would be suggested by the numbers of pharmacists involved. Although it is not possible to obtain accurate figures, it is estimated by reliable sources that the sales of animal health and veterinary products by British companies exceeded £35,000,000 in 1975. The introduction of many new products (invariably more expensive) since then will have increased appreciably this figure for 1978.

The recent implementation of Part III of the Medicines Act has had one beneficial effect in that many people both inside and outside Parliament have been made aware that the pharmacist is the primary person concerned with the handling of medicines. There has been the danger that pharmacists, in their concern for regulations appertaining to human medicines, have lost sight of the fact that medicines are also required for animals and need to be dealt with in a responsible manner for the safety and benefit of the end consumer. As in the case of human medicines, the dateline of February 1 for implementation was unacceptable as it did not allow the pharmacist sufficient time to digest and adapt to the new regulations, nor did it consider the implications for stock on hand. Fortunately, common sense prevailed, and there is to be a transitional period of six months before full implementation of the Act.

Welcome though this "concession" is we cannot and do not accept that the Act is a good one or achieves what it set out to do. The Medicines Act 1968 is concerned with acceptable standards of safety (including safety in use), quality and efficacy in medicines. This naturally

means that there would be some restriction of trade. So many parties have a vested interest in the matter that the degree of restriction is very important—it is the government's job to take decisions which are a compromise in the interest of the majority of those concerned.

The farmer, or end consumer, is interested in buying in a competitive market and also in having an adequate number of sources of supply from which to choose. The pharmacist and veterinary surgeon are interested in supporting the aims of the Act as well as the financial aspect. Unfortunately the Act as it stands at present imposes unreasonable restrictions in some cases and yet allows the whole of the Merchant List to be, in effect if not in words, without any real control.

The Veterinary Surgeon's Act gave the legal right to all, stock owners to treat their own animals. The present legislation prevents the farmer from exercising this right by placing many prophylactic medicines on the POM list. I wonder if the NFU has realised the implication of this action and whether they intend to issue any guidance to their members, or do they feel that the restriction is justified?

As a pharmacist I would be interested to know the toxicity levels of vitamins A and D, dapsone and the compound milk fever metabolites, and whether they have been exceeded often enough to warrant individual diagnosis of a case before using them—as is logically necessary to justify the POM categorisation. It is the constant cry of the pharmacist that medicines are not ordinary items of commerce and therefore must be sold under knowledgeable supervision. This would be achieved *without any reduction in numbers of outlets* if the MAFF accepted the proposal made by the Pharmaceutical Society at its meeting on April 6, 1977. There would be an adequate number of sources of supply but also a gradual and definite progress towards responsible control of all medicines. Let us use the coming six months fully in order to bring home to the powers-that-be the desirability of such control.

What choice have your slimmers got?

57% of all women are slimmers. What they want are quality low calorie alternatives to "normal" foods and beverages. The concentrated fruit drink to provide that kind of alternative is Chekwate.

Chekwate tastes of real fruit.

Chekwate comes in four real-fruit flavours (including the improved flavours of orange and lemon).

What's more, we'll feature all four flavours in a hard-selling ad in the slimming press throughout the heavy slimming months.

So stock up with all four Chekwate flavours now.

You know it's the right choice for your slimming section...and for your slimmers' calorie controlled diets, too.

Grapefruit Lemon Orange Lime



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In 1977 the total sun preparations market was worth approximately £12 million and therefore competition in 1978 is bound to be fierce.

For the launch of Uvitan we have planned our biggest-ever advertising programme using women's magazines, television and cinema.

Full colour spreads in the top women's magazines. During a period of five sizzling months we will achieve a massive 90% coverage of the prime target market for suntan preparations. And an incredible 55% coverage of all adults!

TV and cinema commercials in specially selected areas will support the magazine advertising and will illustrate clearly and persuasively the benefits of Uvitan's special ingredients.

And distinctive display material. Specially designed to make maximum use of a minimum of your shelf-space.

*Optrex Ltd. are appointed selling agents and bonus details will be available from their representative.



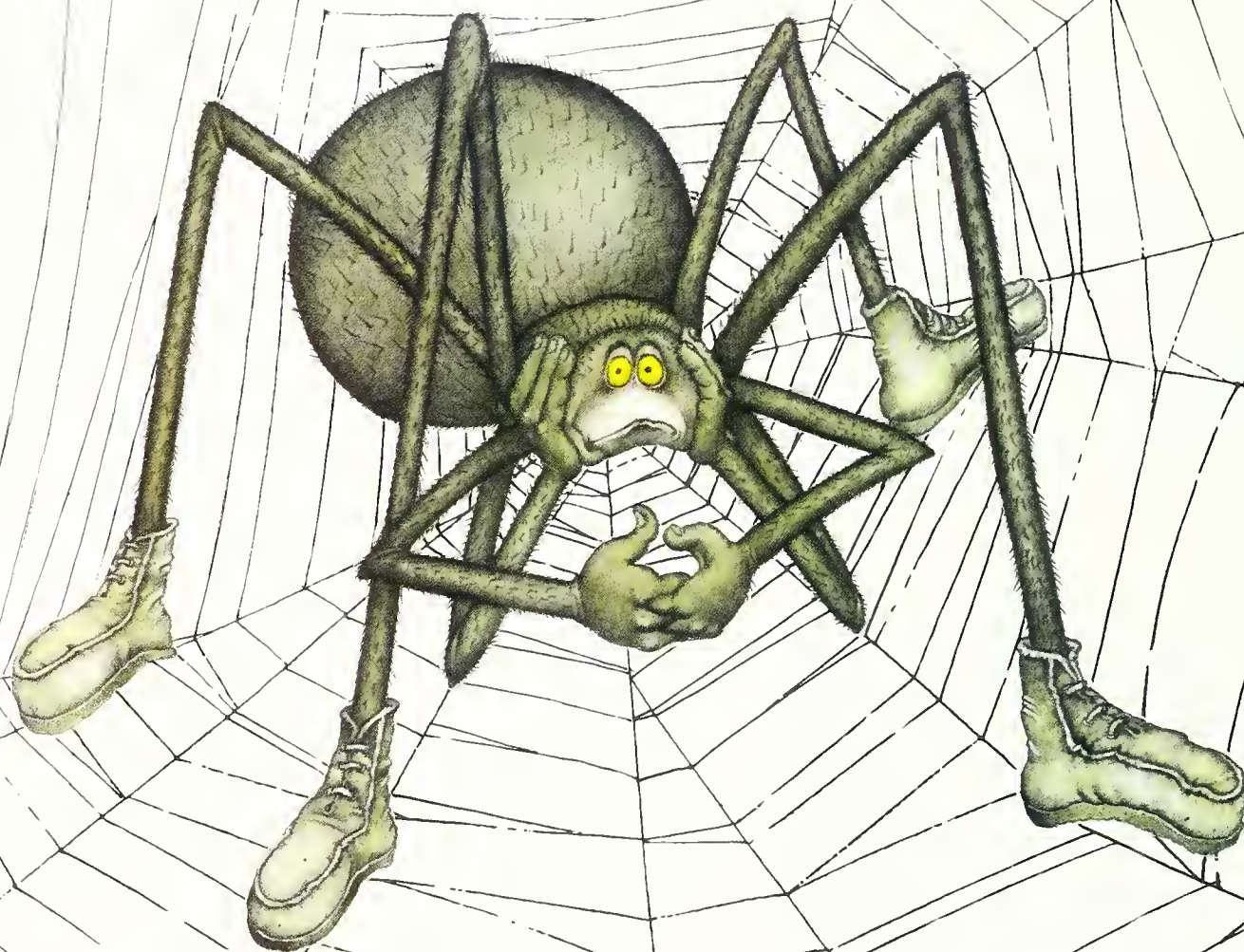
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Once again, our biggest rival won't be advertising this summer.

We have to admit his method of killing flies is very effective, if a trifle old-fashioned.

On the other hand we can offer you three equally effective but rather more modern methods: Vapona Flykiller, Vapona Small Space Flykiller and Vapona Aerosol.

And, unlike, our rival, we put our money where our mouth is when it comes to advertising.

This summer alone we'll be spending over £200,000 on a seven week national T.V. campaign.

With full supporting P.O.S. material. If last summer is anything to go by,

that should represent almost 90% of the advertising on all insecticides.

The point is, we know our advertising works. You only have to look at the success of Vapona.

Last year we increased our share of the slow release insecticide market to 63%. Now we're the brand leader in every retail sector.

Quite simply, nobody offers a better range or bigger support.

No wonder more and more people are asking for Vapona by name.

If you'd like to know more about Vapona's promotional plans, contact: Keith

McCracken (Sales Director) Temana U.K. Ltd., Sealand, Chester CHI 6BA.

Stock Vapona and you can make a killing all summer long.



Vapona.
Kills flies all summer long.

Misleading figures

So the PSNC has joined the ranks of the "establishment and political" connivers and deceivers in its latest issue of *Action* with its statement about on cost. Instead of being honest and publishing a table by which we could calculate our own individual on cost, it prints a totally misleading hypothetical set of figures. They do say if you can't beat them—join them; I can only presume the PSNC has now joined Mr Ennals. What kind of case is this to set before opponents and supporters? Is this not supporting Mr Ennals and his dirty deeds?

What a waste of effort was this current copy of *Action*. Where was the mention of:—

- (1) The redistribution of the £4.5 million discount over-deducted—no doubt they are devising a scheme to return it to those from whom it was not taken originally?
- (2) The date on which we shall be paid for increased prices of drugs—have negotiations ceased on this topic?
- (3) When will we have an end of the discounting scheme?

This copy of *Action* appears to be a "cover up" culled from the classics of its type—in not giving the information required, but what they consider we might like to read, and a calculation with which to amuse ourselves.

On the basis of the given example I have just been under-paid £258.31 on cost. If the *Action* "facts" are those that the PSNC are giving MPs—*please don't*. If the PSNC continues to represent group 6 in its present manner—*please don't*, I cannot afford it.

I earnestly ask the PSNC to take a poll of contractors to establish how many would support "militant action" (even if only to give undated resignations). This would at least help to satisfy those who, like myself, believe they are unsatisfactorily and inadequately represented. A disillusioned group 6 pharmacist.

D. W. Denton

Trowbridge, Wilts

Rodenticides

The article on the new rodenticide, Rodine C, from Mr A. P. Meehan, Rentokil Ltd, might give some of your subscribers the impression that this product was the first to use calciferol as a mouse poison (*C & D*, January 7).

As early as 1969 Sorex research discovered the rodenticidal potential of calciferol. Field and laboratory tests confirmed that a particular formulation containing 0.1 per cent calciferol combined with 0.025 per cent warfarin represented a most effective mouse control agent. By late 1973 we had sufficient data to obtain clearance under the Pesticides Safety Precautions Scheme of the Ministry of Agriculture, and Sorex CR was released to local authorities and other expert

users. Two years later, sufficient experience of effectiveness and safety has been obtained for us to be granted clearance to release the product to domestic users as Sorex CR1. A Ministry of Agriculture survey during 1976 showed that within a very short time Sorex CR had become the most widely used mouse control agent in the UK, having overtaken alpha-chloralose and even the anticoagulants.

Mr Meehan's article suggested that an improved product might be obtained by leaving out one of the two active ingredients, warfarin. The reasoning may lie in the fact that warfarin can somewhat reduce the palatability of certain formulations. It would follow that, in the absence of warfarin, more bait and therefore calciferol might be consumed, perhaps sufficient to compensate for the loss of one toxicant. We are aware of the absolute necessity that any effective formulation must be acceptable to rodents. From the very early stages, the palatability of Sorex CR was given the utmost priority. The current product has been proved to be highly acceptable to mice by independent workers. Mice offered a choice of either Sorex CR or an attractive unpoisoned alternative food, have consistently taken more of the toxic formulation, even where the warfarin concentration is experimentally raised to 0.05 per cent, double that of our standard product. For comparison, the classic warfarin-only formulation is somewhat less attractive when the concentration is set at 0.05 per cent.

The choice of bait base is also critical. We use whole canary seed, since experience indicates that this is by far the most effective for mouse control. Ministry of Agriculture workers evaluating Sorex CR1 in canary seed found it to be far more effective than an otherwise identical experiment formulation on a more commonly used cereal base. The demonstrable success of Sorex CR1 is therefore not only due to our invention of a

new active ingredient. The product must be considered as a whole formulation package evolved over several years.

F. P. Barrett

Director, Sorex (London) Ltd
Wembley, Middlesex

Fivers on the table

I would like to express my complete agreement with the views on leadership put forward by Xrayser (*C&D*, February 25).

It is certainly unreasonable to expect anyone to act as our negotiator on a part time basis. We cannot expect our man to provide energetic, farsighted and forceful leadership unless we are prepared to support him, both with our votes and financially. Should we prove capable of producing a fund in excess of £50,000 by voluntary contributions, it would not, I think, pass unnoticed in the DHSS. In fact, might not this be the most effective way of demonstrating our determination and our unity in a manner befitting a responsible profession, and in a way which would hurt no one? My fiver is on the table too.

G. L. La Frenais

Folkestone

Not unique

We are very surprised to note that in last week's issue that you gave editorial publicity to a firm containing a suggestion that they are unique in buying dead photographic stocks. We buy stocks in the chemist trade and this naturally includes photographic items. We have in fact made several very large purchases of photographic equipment and supplies in recent years, and have been cash buyers of all types of consumer merchandise, to any amount, for the past 60 years.

C. E. Feather

Director

A. & H. Otter Ltd
London EC1

History of pharmacy weekend conference

The British Society for the History of Pharmacy is holding a weekend conference on April 7-9 in Loughborough. Applications should reach the organisers by March 20.

The provisional programme, to be held in Cayley hall of residence, Loughborough University of Technology, lecture theatre F.002 (science building) is as follows:

Friday, April 7

Evening—Dinner; sherry followed by "A Portrait of Leicestershire" by Mr J. P. Brownlow.

Saturday, April 8

Morning—"The Education of an Apothecary—Richard Pultney—in Leicestershire" by Mrs J. G. L. Burnby; "Some Midland Apothecaries" by Dr T. D.

Whittet; "Public Health in Victorian England" by Miss Jean Raymond; annual meeting. *Afternoon*—free. *Evening*—"China Past and Present" by Mr A. G. M. Madge.

Sunday, April 9

Morning—"Eighteenth Century Men of Medicine—Computerised" by Mr P. Wallis; "The Origins and Early Development of Pharmaceutical Education in Liverpool" by Mr B. R. Edwards; "Early Days at the Bradford School of Pharmacy" by Mr J. W. Cooper and Dr W. E. Court.

Full residence fees are £27 although non residential attendance is permissible. Details from the secretary, British Society for the History of Pharmacy, 36 York Place, Edinburgh EH1 3HU.

Paediatric pharmacy symposium leads to group formation

The setting up of a paediatric pharmacy group to study the special problems encountered in this branch of the profession was among the proposals to emerge from a symposium held at Liverpool's Alder Hey Children's Hospital last weekend. The symposium was arranged at the suggestion of Mr Stuart Anderson, Alder Hey principal pharmacist and recipient of the 1977 Merck Sharp & Dohme Award for his work on special formulations for children's hospitals in the UK. Instead of presenting his paper in isolation he thought it would help pharmacists involved in paediatrics to meet and listen to the problems of others in the field.

Professor Harris, professor of child health at Liverpool University, set the scene for the role of the pharmacist in the care of the sick child. Describing himself as a "therapeutic nihilist" he said he had never, despite the 2½ million scripts of others, found a reason to prescribe a liquid tetracycline preparation for a child. He discussed five areas in paediatric care in which he thought pharmacists could extend their scope apart from their traditional role of dispensing and formulation. All but one, the setting up of a poisons bureau, were surveillance roles. Dose, adverse reactions, drug interactions and most controversial, drug of choice surveillance. This last, he realised, went against the enshrined belief in clinical freedom but this had already been eroded by stricter controls. He thought the pharmacist could give a "gentle reminder" that the drug prescribed was not the usual practice. In order to carry out this and the other surveillance roles the pharmacist would need more information about and a closer relationship with the patient—requiring courage on the part of the pharmacist and re-education of the clinician.

Checking difficult

Checking prescribed doses for babies and children was probably the most difficult job in paediatric pharmacy, said Susan Patey, principal pharmacist at Great Ormond Street, London. Ideally all drugs should be tested in each age and weight group before clinical use, but there were very few clinical trials in children, partly for ethical and, partly for financial reasons. The old rules for dosage based on weight and age were not reliable and body surface area was a better guide. But in the early neonate and especially the pre-term baby with their inadequate metabolic systems, all rules failed. In these cases Pincus Catzel's percentage method was used as a guide to starting treatment—in the first two weeks of life 3 to 6 per cent of the adult dose was used, initially and then adjusted depending on blood levels and bacteriological response. Susan Patey emphasised that, in these babies, drugs should not be used unless with strong indications.

Queen Mary's Hospital for Sick Chil-

dren, Carshalton, is the largest comprehensive children's hospital in the UK and Mrs Maureen Johnstone, its principal pharmacist, discussed medicines and their safety from the point of view of prescribing, dispensing, administration and storage. She believed, like Professor Harris, that a child's idiosyncrasies and sensitivities to drugs should be shown on the chart so that the pharmacist was equipped to give advice. Again, like Professor Harris, she said that memory was no substitute for reference books, especially for doses.

Small dose volumes

At Queen Mary's when dispensing liquid medicines they preferred smaller volumes rather than making up to five or 10ml doses, especially in the very young child. Wherever feasible they limited the amount handed to out-patients to two to four weeks' supply rather than say six months. Such large quantities presented a safety hazard in the home apart from stability problems. When labelling children's medicines it was important that parents be left in no doubt as to the dose or the timing of the dose and they backed up the label by counselling parents when drugs were handed out. Additional warning labels were also affixed, but may have to be modified from the adult versions—for example, "This preparation may cause drowsiness. If the child is affected do not allow to cycle." They were considering adding skateboarding!

Mrs Johnstone said that pharmacists at her hospital were more concerned with the administration of drugs to children at home, rather than on the wards but were always prepared to give advice to nurses. This was particularly so in the case of storage of toxic substances other than drugs such as disinfectants when children had the run of the ward. Disinfectants on the wards were in standard containers with child-resistant closures. Again, parents were carefully counselled on storage. Mrs Johnstone would like to see publicity campaigns on storage run by local authorities, especially in the school holidays. In reply to a question about children who had to take medicines to school, Mrs Johnstone said that the attitudes of schools varied and only some would allow teachers to give medicines.

However, the pharmacy did not give child-resistant containers for take outs except for aspirin and paracetamol, unless the parent requested them.

Is there a need for a specialised paediatric drug information service and if so, who should be responsible for it? Mrs Neeta Dain, principal pharmacist at the Birmingham Children's Hospital, posed these two questions at the beginning of the afternoon session. She thought that the earlier talk on the difficulties of drug dosage in children underlined the need for a special information service. Routine queries on side effects, contraindications, adverse reactions, etc, could probably be answered by a general information service but they were not likely to have answers to specialised questions, such as the sugar, salt or gluten content of medicines. Mrs Dain said that some sources of paediatric information had disappeared—the BNF paediatric section and paediatric MIMS. Manufacturers' literature and their information departments were sometimes good sources—many now appreciated the importance of carbohydrate, sodium and potassium content and included this on their data sheets. Mrs Dain thought this should be obligatory. The Pharmaceutical Society (especially for overseas drugs) and other paediatric centres were also useful sources. However, she felt that the present information services were meeting a basic need for clinicians but only when and if information was needed. Nursing staff also have queries but Mrs Dain considered that here the pharmacist should anticipate their needs. Information for nurses should be clear and easy to follow. Antibiotic parenteral charts, for example, should state the form and strength in which the antibiotic would be issued to the ward. Like Mrs Johnstone, her hospital recognised the need for information to parents. Mr Colin Hitchings, president of the Guild and chairman of the afternoon session, questioned whether a national information centre would be preferable to work being duplicated in children's hospitals round the country.

Formulation problems

Diagnosis made, course of treatment and drugs chosen, incompatibilities, etc known—but in paediatrics there still remained the problem of obtaining the drug in the right dose and the right formulation. Miss Heather Elliston, group chief pharmacist of London hospitals for sick children, talked of the difficulties paediatric pharmacists faced in obtaining low-dose tablets and parenterals and liquid preparations. Manufacturers could not advertise products for which they had no product licence. A hospital could buy a production batch from a manufacturer licensed to make specials but unfortunately minimum batch sizes were increasing. Last year the figure for sugar-coated tablets went up from 30,000 to 500,000! Nor, under the Medicines Act, could a region or hospital produce its own tablets for national use. If a drug was

Continued on p361

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Paediatrics symposium

Continued from p358

available in the USA but not in the UK, provided it was for use on a named patient by a named doctor, then a simple telephone call solved that problem. Miss Elliston said she had received urgent drugs within 24 hours of a telephone call to Los Angeles. It was possible to provide medicines for immediate use by extemporaneous preparation. This obviously took staff time and there was often a difficulty in obtaining raw materials. Where there was a BP, BPC or European Pharmacopoeial standard the problem was less, but often the drug was a "chemical". Human food grades were the next best grade. However not all medicines were "one-off". Often a child would be on the drug for months or years and continuity was a big problem. Often parents could not get the drug at their local pharmacy but the hospital was often willing to supply the raw material.

Preparation of the formulary

The final talk of the day was given by Stuart Anderson, originator of the symposium. During the preparation of his formulary he had visited many children's hospitals and collected over 1,000 formulas, about 100 of which were included. Sterile products had not been included but others were chosen on the basis of their stability and palatability. He had tried at all times to give definite quantities rather than "qs" and 5 or 10 ml doses. Mr Anderson said that stability was one of the most important factors in such preparations as it was inconvenient for patients to return every one or two weeks and he would like to see the shelf life of dispensed formulations and dilutions to be at least one month. As regards palatability, non-commercial preparations were often very bitter and the help of the industry was needed, especially as some flavourings had an effect on stability—similarly preservatives. Diuretic preparations were currently causing the most problems in paediatrics but the children most inconvenienced by the lack of paediatric preparations was those with leukaemia or other cancers.

Finally, Mr Anderson suggested the formation of a paediatric pharmacists' group to facilitate the exchange of information between children's hospitals. Initially existing on an informal basis, the group would consist of all pharmacists in children's hospitals and those working exclusively on children's wards. A newsletter would be circulated giving details of drugs on clinical trial etc.

Stuart Anderson's formulary will be issued as a supplement to Proceedings of the Guild No 3, due out in June or July. Non-members can obtain copies of the proceedings (£1) from Guild of Hospital Pharmacists/ASTMS, 10 Jamestown Road, London NW1 7DT

Dr Peter Roylance (left), medical director, Merck Sharpe & Dohme presenting a silver plate to Mr Stuart Anderson who was given the 1977 MSD award for the advancement of hospital pharmacy



Paediatrics, drugs and the law

Children, drugs and the law was the contribution of Mr Charles Stevens, a member of the Pharmaceutical Society's Council. Legal liability was greater in specialised fields, he said, especially paediatrics where the law said that there should be an additional degree of care. A person was considered a child until 18 years old, but after the age of discretion, 16, a child's wishes, provided they were reasonable, should be considered.

Mr Stevens considered there were four areas in which a pharmacist has legal duties. First, treatment: although the doctor prescribes, a pharmacist often gives advice on drugs of choice and methods of administration. Therefore, in order to discharge the full legal obligations a pharmacist needed information to be able to give the right advice. Second, dosage: pharmacists always have had a duty to check doses, but the burden is heavier in children. Third, assault and trespass: drug regimens, especially new ones, came under that heading. Clinical trials were often routed through pharmacies with the pharmacist acting as a professional filter. Fourth, safety: drugs should be handled as safely as possible and not left around.

With adults, responsibility of the pharmacist can be lessened by contributory negligence, say on the part of the patient, but this is no defence where children are concerned. There was also now a new concept in English law—duty to the unborn child. If legal rights are given to the unborn child, then those who treat the pregnant mother will have to consider their legal liability.

Replying to questions, Mr Stevens said that if a doctor shows that he has acted on advice or information given him by a pharmacist and this is incorrect, then it will be the pharmacist who is responsible. But with the advent of information cards which are given to the patient, the scope of a pharmacist's liability has widened. Discussions are underway at present, due to pressure from consumer groups, on the provision of more information to the patient. Once this provision becomes general behaviour, then a pharmacist who does not give the information, with resulting harm to the patient, is legally liable. However, Mr Stevens believes that to enhance their standing pharmacists should be prepared to accept this responsibility.

Ethics of compliance study questioned

The compliance study of patients in general practice, set up by Winthrop Laboratories is questioned in the current *Drug and Therapeutics Bulletin*. The GPs taking part had been asked to recruit six patients with rheumatic disease for whom treatment with Benoral 4.5g daily for at least 4 weeks would be appropriate. The company provides a detailed protocol, data recording forms and 12 x 100 tablets, free, and to cover the practice time involved a GP is offered surgery equipment valued at more than £30. The study is to evaluate patient comprehension of written and verbal instructions and compliance.

The *Bulletin* questions the inflexibility of the regimen and asks who really pays.

It says that, as planned, the study could cost over £70,000 in donations of surgery equipment alone. Indirectly, this would be paid for by the NHS—in the price of Benoral and other Winthrop products. The scale of the study (a planned 18,000 patients) suggests to the *Bulletin* that it is mainly a promotional undertaking which would contravene the industry's code of practice. Such ambiguous studies should perhaps be cleared by an independent professional body, says the *Bulletin*, as the industry should be particularly careful in the grey area between science and commerce.

□ Winthrop Laboratories have rejected the criticisms of the study and think the article prejudices the value of the study and misrepresents the scientific intentions behind it. They think it regrettable that the *Bulletin* chose to publish its views before the findings are available.

Pharmaceutical Society of Great Britain

Council looks at ways to cut Conference costs

A move to reduce or discontinue financial assistance to branch representatives attending the British Pharmaceutical Conference was discussed at last week's meeting of the Pharmaceutical Society's Council. But it was finally agreed that financial aid should continue.

Council were considering ways in which the Conference costs could be reduced as in a paper presented at the meeting which stated that it was wrong that members of the Society should subsidise the relatively small number who attended the Conference. Three ways in which to reduce the subsidy were put forward.

The first, increasing the registration fee had already been implemented. On the second, reducing or discontinuing financial aid to branch representatives, Mr C. C. B. Stevens asked if an estimate had been made of how many people would stop attending the Conference if the subsidy were discontinued or reduced, and whether the reduced number would have to carry a greater burden of expenditure.

The senior administrative assistant Mr S. Southwell, replied that representation of the branches at the Conference was on a sliding scale—in 1977, 125 had received a subsidy. Mr J. C. Bloomfield suggested that since the number was so small there was no justification for retaining the subsidy which many branch members considered only a token payment. He moved rejection of the subsidy.

Mr W. M. Darling emphasised that if financial assistance were removed the character of the Conference would be changed and there would be strong criticism from the branches.

Profitable investment

The treasurer, Mr A. Howells, thought the financial assistance to branch representatives was a profitable investment for the Society and it was agreed that financial assistance to branch representatives should continue.

Mr J. P. Bannerman moved that the assistance should be reduced by removing the subsidy on Conference tickets—£3,500 in 1977. The motion was carried by 11 votes to 8. Professor A. H. Beckett suggested that the Society should be more generous in support of travelling and expenses but the secretary and registrar, Mr D. F. Lewis pointed out that the whole purpose was to effect an economy, not to redistribute aid.

The Council considered the third sug-

gestion of the paper, cutting the length of the Conference to three days or a weekend. The vice-president, Mr J. E. Balmford considered it premature to contemplate reducing the Conference to three days when as yet there was no experience of a four-day Conference.

The president, Mrs E. J. M. Leigh emphasised the need to give adequate notice to host branches. The 1979 Conference, in Exeter, was to be a four-day event, but the Council had to consider arrangements for 1980, in Newcastle and 1981, in Brighton. The deputy secretary, Mr R. Dickinson, thought it would be three or four years before a change to a three-day Conference could be made. An amendment, that the matter of a three-day Conference should be reviewed after two years' experience of a four-year Conference was carried.

Council then considered whether the Conference ticket should include all costs, a proportion of headquarters' costs, or only the local committee's costs as was currently the case. Professor Beckett said it was the function of the Society to be involved in Conferences and it was unreasonable to expect that that could be done without some cost to the Society.

No urgency

Mr D. N. Sharpe said that Council did not want to be seen to be ruining the Conference and he moved that, subject to the removal of the cost of the Conference tickets from the branch subsidy, the financing of the Conference should be continued as before. Mr Bloomfield however, could not see any urgency and moved an amendment that the matter be referred back to the working party on the Society's finances. This was not accepted until Mr Sharpe's motion was lost. Mr Bloomfield put his motion again and it was then carried.

An article planned to be published in the *Drug and Therapeutics Bulletin*, which suggests that prescription charges should be abolished on official preparations prescribed under the National Health Service, was considered by the General Practice Subcommittee. Among comments on the article to be submitted to the editor of the *Bulletin* are that practical problems would arise for pharmacists if such a proposal was accepted. There were occasions when pharmacists dispensed a proprietary brand because it was most economical and the most appropriate form of medication despite the fact that the prescriber might have

ordered it by its generic name. If it was agreed that there would be no charge when a generic was supplied then a pharmacist supplying a proprietary instead of a generic product would have to make a charge and thus possibly antagonise the patient. There would also be an increase in the pharmacists' stockholding because he would be under pressure from the public to stock generic brands. That would be an added burden to pharmacists and would ultimately be an increased charge on the State.

A new scale for pricing private prescriptions, counter prescribed products and emergency supplies of Prescription Only Medicines was approved by Council and will be circulated shortly to all registered pharmacies. A letter from the Price Commission was considered which pointed out that the Society does not need the approval of the Commission to publish a list though individual pharmacy enterprises do have obligations to comply with the Price Code.

Views on labelling

The Department of Health has asked for the Society's views on the labelling of dispensed medicines. The Department had received several letters from Somerset Women's Institutes to the effect that the dosage instructions on "pill" and medicine containers should, by law, be printed in clearer and larger type, "at least as large as the brand name". The Department is to be told that there were occasions when a handwritten label could be made particularly clear for a partially sighted person and that the Medicines (Labelling) Regulations 1977 required that all particulars should be clear, legible and readily discernible so as to be easily read by an intending user.

Because a pharmacist must be present in a pharmacy irrespective of whether or not he was dispensing, and because of the pharmacist's increasing involvement in general matters of health care, the Society is to point out to the Department of Health that the present system of remuneration is inadequate.

Council agreed to a proposal that the Society's preparations for a new Pharmacy Bill should be expedited and that, among other matters, changes should be sought in the wording pertaining to the Statutory Committee, and in the method by which complaints were made to the Committee.

The secretary and registrar, Mr D. F. Lewis, referred to the effect on traditional wholesale companies of informal buying groups and small wholesale companies who offered only a limited inventory of "ethical" medicines at an extra discount for cash settlement. Council agreed that the Society should sponsor an informal and private discussion forum at which interested parties would be invited to attend.

The need for a sensible, practical national plan for continuing education within pharmacy was agreed by the Society's postgraduate education subcommittee. It was thought a "body of

Continued on p365

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Birmingham 021 472 7171	Croydon 01 688 5116	Leicester 0533 881354	Portchester, Hants 07018 81124	Wednesbury 021 556 4471
Blackpool 0253 23961	Darlington 0325 61491	Leslie, Fife 0592 743255	Port Dinorwic, Gwynedd 0248 670401	York 0904 27451
Bolton 0204 73441	Eckington, Sheffield 024 683 2175	Liverpool 051 922 2732	Queensferry, Clwyd 0244 812887	
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Improving status

knowledge" common to all pharmacists, irrespective of professional environment, should be required as a basis for any recognition of continuing education in the form of a diploma.

It was further agreed, that any continuing education programme should be an encouragement to improve status and not mandatory. Also any postgraduate diploma should not result in restricting a pharmacist from moving from one branch of the profession to another, and that career progress must still remain the decision of the employer and not be seen to be possibly dependent on any policy of the profession which would require the employee to hold such a postgraduate diploma.

The meeting agreed to the concept of a three-to five-year period of postgraduate education leading to membership or fellowship of a college of practice with "in-post" experience and an examination assessed by a board. There would then be a specialisation course if justified.

Dr S. E. Fullerton said that if the working party on preregistration experience were to agree upon an assessment procedure for formal recognition of the preregistration year, the intending competent pharmacist would have to overcome three "hurdles"—the undergraduate course, the preregistration year, and a structured form of continuing education. When asked whether the "hurdles" (with the exception of the undergraduate phase) would include formal examination, Miss Marion Hodges (a member of the working party on postgraduate education of hospital pharmacists) explained the motivation behind the report was to get away from formal courses and emphasise the responsibility of the individual in gaining proficiency in his chosen branch.

Common core

It was agreed that the office should, prepare a document outlining the "common core" of knowledge; produce specialist programmes for the second part of the course, using the reports of the practice working parties and the following as sources of information: for the industrial pharmacist, the proposed syllabus for the "qualified person" in industry about which discussions were being held between the Society and the Royal Institute of Chemistry; for the general practice pharmacist, analysis of postgraduate courses provided over the past six years; for the hospital pharmacist, analysis of courses mounted for hospital pharmacists by the regional pharmaceutical officers.

Arising from discussion Professor P. H. Elworthy pointed out there were two streams of pharmacists recently qualified and those who were older and required

up-dating in addition to new material. It was, therefore, recommended that courses be identified as "continuing education" or "refresher" type courses as outlined above. Council however amended the proposal so that regional committees should include in their total programme a reasonable mix of both types of refresher course.

After the postgraduate education subcommittee had considered a document entitled "The future for community and hospital pharmacy practice — an appraisal", it recommended and Council agreed that an application should be made for a substantial grant from the Department of Health to support a Society research unit in postgraduate education.

Doubt over another London conference

The 1982 and 1984 British Pharmaceutical Conferences will be held in Edinburgh and Southampton respectively. It was also recommended, by the Organisation Committee, that the 1983 conference be held in London. However, at the Council meeting, Mr Dalglish expressed concern. He acknowledged it was in accordance with precedent, that the Conference be held in London every 10 years, but recalled that in 1973 some had felt that that should be the last London Conference because of the expense and unsatisfactory accommodation. He moved an amendment, that the holding of the Conference in London in 1983 should only be considered after a financial investigation.

The deputy secretary, Mr R. Dickinson said the office was investigating various types of venue in London, and could present facts to Council within a month or two. Mr D. Sharpe, pointing out that it had always been more expensive in London, said nothing had changed. The amendment was carried.

A meeting of all members of the Society resident on the Isle of Man is to be held soon to consider how much support exists for a local branch on the Island. The chairman of the Organisation Committee is to represent the Society.

Dr Gavin Strang, Parliamentary Secretary to the Ministry of Agriculture, Fisheries and Food, is to be informed of the Society's concern that he had not acceded to its requests that certain animal medicines should be removed from the Prescription Only Medicines List and he is to be asked to give the matter further consideration. The products in question are dapsone, compound borogluconate injections, vitamin injections and copper injections.

The Society wishes to hold urgent discussions with the Ministry of Defence concerning the pharmaceutical services in the armed forces. The Society's main concern is that the arrangements for the dispensing of medicines do not include the safeguard which is considered essential in the National Health Service, that normally medicines should be dispensed by or supervised by a pharmacist.

A request from the secretary of a

Local Pharmaceutical Committee that pharmacists contemplating opening a new pharmacy should be advised to contact the LPC secretary in the area to discuss the economics of the proposed business was considered by the general practice subcommittee who recommended, and Council agreed, that the request should not be granted because of the problems that could be caused.

The Health Education Council and the Department of Health are to be informed that the Society regrets it was not consulted over the HEC "Better health" campaign because, although the theme was acceptable to the Society, some of the wording and the cartoon characterisations used were inappropriate.

Items included under the heading "Pharmaceutical precautions" in product data sheets should be included in the general body of the data sheet text since the use of the heading implied that the rest of the text was of no significance to pharmacists. That is one of a number of recommendations on data sheets being sent to the Department by the Society.

An amendment is to be sought to the wording of a Private Member's Bill, the Consumer Safety Bill, so that its provision would not apply to medicines. The Law Committee was informed that the Bill was intended "to make further provisions with respect to safety of consumers", and that its provisions would enable the Secretary of State to make regulations for the purpose of preventing or reducing the risk of death or personal injury from goods, so giving him greater powers than he had at present. Although the Bill was not intended to extend to medicines, the definition of the word "goods" in the Bill appeared to be applicable to medicines.

POM guidance

A paper offering guidance on the application of the Prescription Only Medicines Emergency Supplies Regulations is to be prepared by the office. The Ethics Committee had been told that one pharmacist had misinterpreted the regulations and had drafted a letter which he had planned to distribute to his customers advertising the availability of emergency supplies. Council said that that pharmacist should be advised to take no action to implement his suggestion.

The Department is to be informed of the Society's dissatisfaction that only one pharmacist (Mr W. M. Darling) had been appointed to the Health Education Council.

Corporate advertising was considered by the Ethics Committee and it was agreed that the office should prepare a paper on the subject, including financial implications, which the Committee could consider in the future.

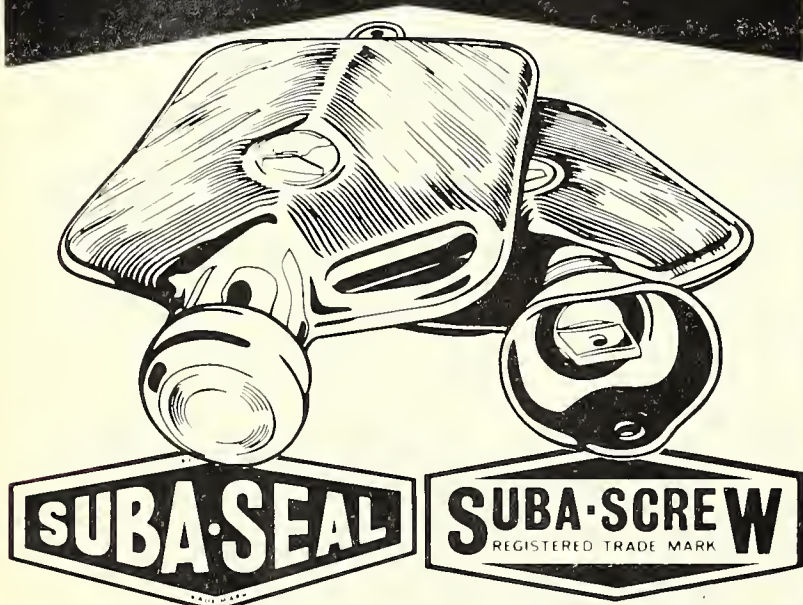
Dr J. Swarbrick (dean of the School of Pharmacy, London University) is to be designated a fellow of the Society.

The Society's 1978 Charter Gold medal will be presented to Dr Douglas Whittet (chief pharmacist, Department of Health and Social Security), and the silver medal to Mrs Jessie Rawcliffe, of Cheadle, Cheshire.

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CHEMIST & DRUGGIST

Sir John Hanbury reminisces

The younger generation of pharmacists might not altogether appreciate the high level of skill and enterprise shown in the retail establishments of their forebears 150 years ago, said Sir John Hanbury.

At the first foundation lecture of the British Society for the History of Pharmacy his paper "Pharmacy in the first half of the 20th century: A reminiscence" dealt with one of the great watershed periods when the traditional empirical drugs of our forefathers were being replaced first by purified active principles, then relatively simple chemical modifications of naturally occurring drugs, and in our own time by the dramatic discoveries of the synthetic organic chemist.

At around 1800 the Plough Court pharmacy was making amongst many other things, hydrochloric, nitric and sulphuric acids, ammonia, borax, camphor, pure potassium hydroxide in sticks, silver nitrate, sulphur, ether, ferrous sulphate, not less than 10 salts and oxides of mercury and many salts of antimony, arsenic, zinc and bismuth.

In 1822, Thomas Morson published his first price list containing about a dozen items on a single sheet of paper. He advertised the availability of quinine sulphate, morphine sulphate, iodine, potassium iodide, strychnine, emetine and several other alkaloids. Three years later, however, he issued a far more comprehensive price list embracing the full quota of pharmaceuticals then in use.

In 1865 Joseph Lister began the systematic use of carbolic acid in aseptic surgery and it is interesting to note that in 1886 the pharmacist William Martindale drew Lister's attention to the antiseptic properties of the double cyanide of zinc and mercury, a salt which was a speciality of Martindale's in the 1880s.

Sir John later turned to the field of improved nutrition in which pharmacists played an important role.

He mentioned cod liver oil and extract

of malt and regretted that many quite indefensible claims were made for the therapeutic virtues of the extract. It was a palatable and easily digestible source of carbohydrate and calories and it contained about 4 per cent of protein. At a time when nutrition was still far from satisfactory, it had its place and in the first half of this century pharmacists disposed of thousands of tons of it every year. This was an instance of a purely pharmaceutical process being taken over and operated by brewers and distillers whose use of malt extract was far greater than that used in medicine.

His earliest pharmaceutical recollection was of arriving at Bloomsbury Square on the first morning of term. Immediately adjacent to the entrance hall to the old School of Pharmacy at Bloomsbury Square was the museum where specimens of all the vegetable drugs of the then BP and BPC were set out in boxes for students to examine, learn and inwardly digest. The names of the drugs were enough to bring nostalgic tears to the eyes; buchu, saffron, cinnamon, aconite, cloves, colchicum, krameria, rhatany. "My first ever lecture at the School of Pharmacy, was Professor Greenish's introduction to the subject of pharmacy" in which he illustrated with slides the natural history and origin of many of the commonest drugs together with their packaging and transportation to the London drug market. "To my impressionable mind it was an opening into the world of the Arabian Nights and I was more than ever convinced that I had indeed made a wise choice of career. I sincerely hope that this Society will see to it that the lecture theatre at the 'Square' will be minutely described and recorded for posterity, including the rats that occasionally scurried precariously along the water pipes above the lecturer's head. For 100 years it surely occupied a unique place in British pharmacy."

WESTMINSTER REPORT

Withdrawal of medicines

Asked by Mr Jack Ashley what regulations existed to ensure stocks were withdrawn from chemist shops when supplies were stopped by a manufacturer because of potential hazards, Mr Roland Moyle, Minister for Health replied there were no regulations. Withdrawal did not prevent a retail pharmacist from supplying when presented with a prescription. However, there was power under Section 62 of the Medicines Act to make a Statutory Order totally prohibiting supply of a product on the grounds of safety. No such order has ever been made in the case of a prescription only product, as the requirement of a prescription is considered sufficient safeguard. It would possibly be considered if advice were received from the appropriate advisory body.

VAT appeals bill sets up tribunal

Mr John Wakeham is to seek leave in the Commons on March 22 to introduce a Private Member's Bill to change the powers of the Commissioners who consider appeals against VAT. It would set up a VAT tribunal and would amend sections 31 and 40 of the Finance Act 1972.

Medical Bill

Initiating a debate on the Medical Bill in the Commons Second Reading Committee, Mr Roland Moyle, Minister for Health, referred to discussions with the medical profession which had taken place since the Bill was introduced in the House of Lords. As a result of the discussions, the Government would be moving amendments to effect a more rational system of registration of overseas doctors.

The Committee recommended that the Bill should be read a second time.

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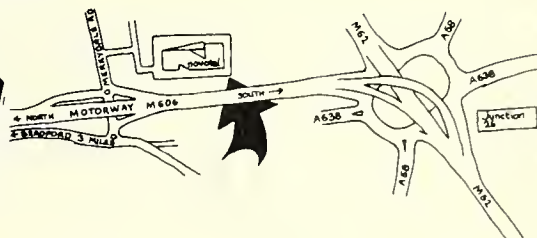
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COMPANY NEWS

Higher-limit for Unichem shares?

Amendments to the Industrial and Provident Societies Acts 1965-1968 could make it permissible for Unichem members' shareholdings to be raised from the present 1,000 limit to a maximum of 5,000. The proposal is to be put at a special meeting at the time of Unichem's annual meeting and if accepted approval would have to be obtained from the Registrar for the societies. If approval is obtained the new limit could apply from June.

UG plan £17½ million capital investment

United Glass Ltd plan to spend £17.5m in investment projects this year, and the greatest part of the allocation will be to the glass containers division which in money terms is the largest and most capital-intensive sector of the business.

In 1977 each of the company's four divisions operated at a profit for the first time in its history. The total profit for the year was a record at £11.5m compared with £6.5m in the accounting period of 50 weeks in 1976. Sales in 1977 totalled £125.5m, of which £87m was from sales of glass containers.

Production in volume terms in 1977 was 11 per cent greater than in 1976 but, even so, it was sometimes not possible to meet customers' requirements. With the easing of demand in the latter part of the year, however, stocks have been rebuilt to satisfactory levels and, combined with greater production capacity, the company expects to be able to service a substantially higher demand this year.

Fisons made record profit last year

Turnover of Fisons Ltd and associated companies in 1977 amounted to £293.3m, an increase of 15.2 per cent over 1976. Pre-tax profit was up 17.2 per cent at £21.2m, a new record. The figures include the results of the recently acquired Gallenkamp Group for the second half of the year.

Of the individual divisions, increases were achieved by pharmaceuticals and horticulture, and fertilisers recovered after a poor first half. In the pharmaceutical division, volume growth of 5 per cent in the UK and 16 per cent overseas was largely offset by the adverse effects of strong sterling. Sales were 8.6 per cent up at £56m, and profit was 5.6 per cent higher at £10.7m, despite few opportunities to offset cost inflation by price increases. Research and development expenditure increased by £1.6m (36 per cent).

Intal continued to make good progress at home and abroad, and disengagement

from the Syntex agreement in the USA added to costs in 1977 but permits the company to reorganise its activities in North America. Sales in Japan, Holland and Scandinavia showed considerable growth, and positive gains resulted from reorganisation in France.

Beecham to invest £41m in UK plants

Beecham Pharmaceuticals are proposing to invest approximately £41m at their Worthing and Crawley factories in Sussex, and the Irvine factory in Scotland. About one-third of the total amount will be used to build a chemical plant at Irvine, where the company has spent more than £25m since 1970 on penicillin G and chemical production facilities.

The plant will be needed to produce new chemical entities expected to result from the rapid expansion of Beecham research and development expenditure, which rose from £11.2m in 1974-75 to £19.4m in 1976-77 and has again increased significantly in 1977-78.

The remaining two-thirds will be used to modernise and reorganise the factories in south-east England, particularly the larger one at Worthing. The Worthing programme will include a significant expansion of process development facilities, the construction of a new allergy vaccine production unit, and major re-equipment in several other departments. This factory has been repeatedly enlarged since it became operational in 1961, and a major objective will be to rationalise some of the earlier developments, leading to improved efficiency.

The capital programme is expected to be completed within three years.

Appleford to extend contract packing

Appleford Ltd are seeking to extend their contract packing business which currently includes diabetic products, protein food supplements, canned fruits, jams and wines. Although bulk lines are preferred, smaller runs are often produced, one day's factory run being the minimum.

The factory near Colnbrook with a floor area of 46,000 sq ft has three canning lines, two utility lines, two labelling lines, and two with shrink-wrap packaging facilities. In addition, socket filling is undertaken. Inquiries should be addressed to Mr John Paine, Appleford Ltd, Poyle Close, Colnbrook, Slough SL3 0AB (telephone 02812 2331).

Dixor bid refused

The offer for the outstanding shares of Dixor Ltd made last week (*C&D*, March 4, p327) was at the rate of 28p per share, the same as paid by the same group of businessmen for their earlier acquisition of the 57.2 per cent stake held by Matthew Holdings. This price however, was considerably below the current market price of 47p, and the

chairman and directors of Dixor, who hold 11.4 per cent of the shares, have refused the offer.

Publication of Dixors' results for the nine months to October 1977 has been further delayed, but is expected in the next three weeks. A preliminary balance sheet for the first five months of the current accounting period is to be produced at the same time.

Warner-Lambert beat records in 1977

Record sales and earnings in 1977 are reported by Warner-Lambert Co. Sales were \$2,542m, an increase of 8 per cent over 1976, and net income rose 18 per cent to \$187,616m.

Fourth quarter sales were \$684m, an increase of 12 per cent over the same period of 1976, and net income was \$35m, an increase of 76 per cent. The sales growth was aided by the introduction of five new products, including a new tranquilliser, an early pregnancy test, multifocal lens which eliminates segment lines, a soft contact lens, and a shaving system designed for women.

Briefly

Village Bath Products have changed address to 13 Denbigh Hall Estate, Bletchley, Milton Keynes MK3 7QT (telephone: 0908 79528).

The marketing and sales departments of **Halls-Hudnut Ltd** are now at Woodside Avenue, Eastleigh, Hants 505 4QD (telephone Eastleigh (0703) 619161). All other departments of the company remain at Chestnut Avenue, Eastleigh.

Appointments



Barry MacDonald and Tony Savage

Bristol-Myers Co Ltd: Mr Barry MacDonald has been promoted to national field sales manager. He joined the company in 1973 and for the past 12 months has been sales manager for the national account division. Mr Tony Savage, who joined the company in 1976 as northern regional sales manager, has been promoted to national account sales manager.

Upjohn Ltd: Mr Keith Krzywicki (hospital sales manager) has been appointed senior product manager of the pharmaceutical division. Mr Michael Cunningham (district sales manager) is now hospital sales manager; and Mr Michael Lawson (hospital sales representative) has been appointed product manager.

MARKET NEWS

Further jump in peppermint oils

London, March 8: Although rain has now come to the mint-growing areas of Brazil the end of the drought has come too late to save much of the mint plants which are about one-third of normal size. The expected crude oil production this year is expected to be around 50 per cent of average and if this estimate turns out to be justified the yield of peppermint oil and menthol will be at their lowest point since 1960, according to market sources in London. Last week spot oil rose to £5.50 kg from £4.85 and shipment to £5.40 from £4.80. The Chinese variety was also increased but by a smaller margin.

Brazilian menthol gained 25p kg on the spot and 50p for shipment. Because Chinese prices are more competitive most orders are currently being filled with this material especially those orders for export where the price is not affected by the UK import duty.

Further movement in oils included cedarwood, sandalwood and Chinese spearmint—all dearer. Lemongrass was lower.

Trade in crude drugs was fairly quiet, the main feature being provided by benzoin. Reports of a shortage at origin and higher quotations by shippers resulted in a rise of £30 cwt for the almonds. Also dearer were aloes, Peru balsam, cascara, cherry bark, hydrastis and pepper. Lower were gentian root, lemon peel, sarsaparilla and tonquin beans.

Pharmaceutical chemicals

Acetone: £262 to £266 metric ton as to grade for 30-drum lots.
Adrenaline: (per g) 1-kg lots base £0.25; acid tartrate £0.20.
Aloin: 50-kg lots £18.05 kg.
Atropine: (Per kg in ½-kg lots) Alkaloid £133.70; methonitrate £102, methylbromide £124.40, sulphate £94.50.
Bismuth salts: £ per kg.

	50-kg	250-kg
carbonate	10.46	10.41
salicylate	8.70	—
subgallate	9.24	—
subnitrate	9.47	9.40

Caffeine: Anhydrous £4.56 kg in 100-kg lots.
Chloral hydrate: 50-kg lots £1.43 kg.

Choline: (500-kg lots) bitartrate £2.25 kg; dihydrogen citrate £2.40.
Stilboestrol: BP in 25-kg lots, £115.50 kg.
Strychnine: Alkaloid £74.30 per kg; sulphate and hydrochloride £60.40 kg, 5-10 kg lots.
Succinylsulphathiazole: 50-kg lots £5.32 kg.
Sulphacetamide sodium: BP £7.25 kg for 50-kg.
Sulphadimidine: 50-kg lots £5.20 kg.
Sulphamethizole: £8.26 kg in 1,000-kg lots.
Sulphaquinoxaline: BVetC £11.20 kg; sodium salt £12.71 kg both in 50-kg lots.

Crude drugs

Aloes: Cape £1,180 ton spot; £1,100, cif. Curacao £2,450, cif nominal.
Balsams: (kg) **Canada:** steady at £11 spot; £10.75, cif. **Copaiba:** £2.10 spot; no cif. **Peru:** £6.60 spot £6.20, cif. **Tolu:** £4.80 spot.
Benzoin Block £133 cwt spot; £132 cif.
Camphor: Natural powder £5.15 kg spot, and cif. Synthetic £0.85 spot and cif.
Cascara: £1,150 metric ton spot; £1,120 cif.
Cherry bark: spot £1,180 metric ton; £1,150, cif.
Cinnamon: Seychelles bark £440 metric ton spot; £415, cif. Ceylon quills 4 o's £0.74 lb; featherings £300 metric ton, cif.
Gentian: Root £1,320 metric ton spot; £1,300, cif.
Ginger: Cochin new crop £935 metric ton, cif. Jamaican nominal. Nigeria split £1,200 spot nominal, peeled £1,400 spot nominal. Sierra Leone £1,150, cif.
Henbane: Niger, £1,710 metric ton spot; £1,680, cif.
Lemon peel: Unextracted £1,020 metric ton spot; shipment £980, cif.
Menthol: (kg) Brazilian £9 spot, and cif Chinese £8.40 in bond; £8.10 afloat and cif.
Pepper (ton, cif) Sarawak black £1,280 spot; £1,185, cif; white £1,705 spot; £1,590 cif.
Sarsaparilla: Mexican £1.66 kg, spot £1.60, Jamaican £1.90 spot; £1.88 cif.
Seeds: (metric ton, cif) **Anise:** China star £880 nominal. **Caraway:** Dutch £780. **Celery:** Indian £470.
Coriander: Indian £350. **Cumin:** Egyptian £925, Turkish £915, Iranian £840. **Dill:** £220. **Maw:** £450.
Tonquin beans: £3.50 kg spot; £3.40, cif.
Turmeric: Madras finger £955 ton afloat.

Essential oils

Cedarwood: Chinese £1.40 kg spot and cif.
Lemongrass: Cochin £5.30 kg spot; £4.80, cif.
Peppermint: (kg) Arvensis—Brazilian £5.50 spot; shipment £5.40, cif. Chinese £4.70 spot; £4.55, cif. Piperata, American Far West from about £22, cif.
Sandalwood: Mysore £57 kg spot.
Spearmint: (kg) American Far-West £15. Chinese spot £12.50, shipment £12.25, cif, nominal.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

COMING EVENTS

Monday, March 13

Epsom Branch, Pharmaceutical Society, Seminar room, Epsom District Hospital, Dorking Road, Epsom, at 7.45 pm. Dr J. Swarbrick (dean, School of Pharmacy) on "The relevance of pharmacy education to pharmacy."
Exhibition of US Scientific & Industrial Laboratory Instruments, US Trade Centre, Langham Place London W1, at 9 am. Until March 17.
Harrow & Hillingdon Branch, Pharmaceutical Society, Clinical lecture theatre, Northwick Park Hospital, Harrow, at 7.30 pm. Mr David Sharpe (member of Society's Council) on "Current affairs."
Nottingham Branch, Pharmaceutical Society, Postgraduate medical centre, City Hospital, Hucknall Road, Nottingham, at 8 pm. Mr J. P. Williams (administrator, Nottingham FPC) on "The work of the Family Practitioner Committee."

Tuesday, March 14

Fife Branch, Pharmaceutical Society, Ollerton Hotel, Kirkaldy, at 7.45 pm. Chief inspector

D. Beveridge (community liaison, Fife Constabulary) on "Drug security in the community."

Galen group, Croydon, Friends' meeting house, Park Lane, Croydon, at 8 pm. Annual meeting followed by Colin and Pauline Whitfield on "How does your garden grow?"

Lanarkshire Branch, Pharmaceutical Society, Nurses recreation hall, Strathclyde Hospital, Motherwell, at 7.30 pm. Mr Jim Bannerman (member of Society's Council) on "Reflections on current problems."

Norfolk Branch, National Pharmaceutical Association, Postgraduate centre, Norfolk & Norwich Hospital, at 7.30 pm. Mr T. P. Astill (deputy secretary, NPA) on "You, your workers and the law."

North Metropolitan Branch, Pharmaceutical Society, Pharmacy outpatients waiting area, St Bartholomew's Hospital, at 8pm. Dr P. F. M. Wrigley (consultant physician, oncology dept) on "Advances in the treatment of cancer."

Plymouth Branch, National Pharmaceutical Association, Duke of Cornwall Hotel, Room 31/32, Millbay Road, Plymouth, at 8 pm. Alan Smith (chief executive, PSNC) on "The impact of health centres."

Wednesday, March 15

Brighton Branch, Pharmaceutical Society, Postgraduate medical centre, Brighton General Hospital, Elm Grove, Brighton, at 7.15 pm. Annual conjoint meeting with Brighton division of BMA. Dr Marcia Wilkinson (director, Princess Margaret migraine clinics) on "Migraine, cause and treatment."

Edinburgh Branch, Pharmaceutical Society, Society's House, 36 York Place, Edinburgh, at 7.45 pm. Three papers by young authors.

Thursday, March 16

Ayrshire Branch, Pharmaceutical Society, Savoy Park Hotel, Ayr, at 8 pm. Mr Gordon Campbell on "50,000 customers an hour."
Bradford & Halifax Branch, National Pharmaceutical Association, Victoria Hotel, Bridge Street, Bradford, at 8 pm. Mr W. A. G. Kneale (EEC liaison officer, NPA) on "Remuneration, planned distribution and doctors' dispensing on the continent."

Bristol Branch, Pharmaceutical Society with **Somerset Branch,** Salisbury Hotel, Weston-super-Mare, at 7.30 pm. Mr R. G. Todd (keeper of the Society's collection) on "The Society's historical collection."

Dundee and Eastern Scottish Branch, Pharmaceutical Society, Ninewells medical school Dundee at 7.30 pm. Annual meeting and Dr L. Christopher (Ninewells medical school) on "Report on local survey of OTC medicines."

Harrogate Branch, Pharmaceutical Society, Postgraduate centre, Harrogate General Hospital, at 8pm. Professor D. J. Gee (pathologist) on "Did they fall or were they pushed?"

Hull Chemists' Association, Postgraduate centre, Hull Royal Infirmary, at 7.45 pm. Dr S. T. Lunt on "A view of Holy Trinity."

Leeds Branch, National Pharmaceutical Association, Golden Lion Hotel, Lower Briggate, at 8 pm. Colin Hetherington (immediate past president of Guild of Hospital Pharmacists) on "Hospital pharmacy."

Liverpool Branch, Pharmaceutical Association, Wirral postgraduate medical centre, Clatterbridge Hospital, Bebington, at 8 pm. Joint meeting with Mersey Region. Local speakers on "Pharmacy forum."

Manchester & Salford Branch, National Pharmaceutical Association, Pharmacy lecture theatre, the University, Oxford Road, Manchester, at 8 pm. Dr W. Gwynne Thomas (pharmaceutical director, medicines division, Department of Health) on "Quality assurance and the patient."

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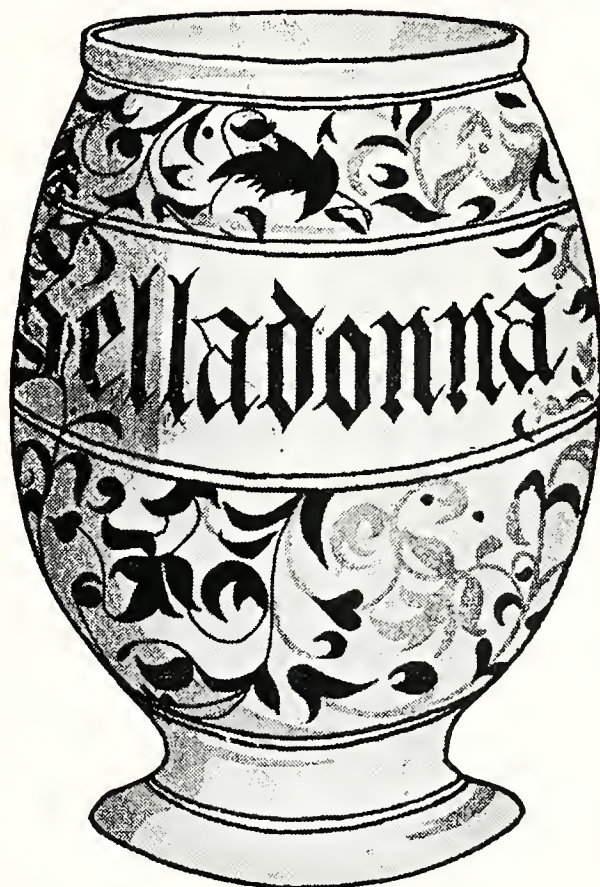
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